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ETP benefits unclear say IT assessors

Burr: Council will revisit Charter objects

Minor ailment schemes top PCT wish lists

Bringing up baby: food, fun and pharmacy





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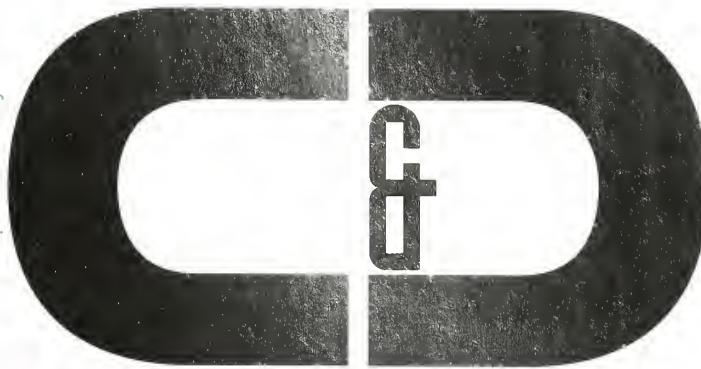
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Wales to lower script charges 10

As the first stage in its plan to abolish prescription charges by 2007, Wales will start reducing them in the next financial year



Towards a patient-centred service 18

Riaz Esmail, left, a community pharmacist from Middlesex has redesigned his pharmacy to fit the needs of his patients after asking them which services they valued most. We look at this, and other stories from last week's BPC

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Fawz Farhan continues her series on baby and child development with a look at what constitutes a healthy newborn baby



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Council to revisit Charter objects

by Gary Paragpuri

gparagpuri@cmpinformation.com

The Royal Pharmaceutical Society's Council will revisit the objects in its draft Charter following feedback from pharmacists highlighting the omission of the object to safeguard and promote members' interests as a key concern.

The Society originally proposed relegating this particular object to a power in its Charter, which meant it would not be explicitly required to carry out the function.

But this option proved unpopular with members and precipitated a special general meeting this summer at which pharmacists called for the object to be reinstated.

Further, the Charter consultation highlighted this topic as one of pharmacists' main concerns.

"Clearly, and with some justification, the apparent demotion of these requirements has caused many to believe that the Council is selling the profession short. This is not and never was our intention," said Andrew Burr, the Council's communication lead for the draft Charter, at a debate on modernisation of the RPSGB at last week's BPC.

Although Council has not yet formally discussed the feedback,

Mr Burr said: "I can confirm that the Council will look again at the objects in the draft Charter and will wish to give greater prominence to safeguarding the future development of the profession and promoting its contribution to health and healthcare."

He said: "To me, it makes sense for the objects in the revised Charter to clearly and explicitly reflect the Society's remit in leading, developing and regulating the profession."

He added that members should hear the Council's views on the feedback before deciding if their views had been taken on board.

"Immediately after the Council meeting in October will be the opportunity to see exactly how the Society and Council has listened to what the consultation process has said ... and I hope that the members will then judge the Council [to see], if they did listen, did they respond to the majority of pharmacists' concerns," he said.

"What you want is a Council with strong leadership that can make tough decisions and implement them, and that's what I think the Council will do in October."

Discussing the points raised in the Charter consultation, Mr Burr said, as well as the removal of the object about safeguarding



members' interests, the concerns related to a lack of detail about reflecting diversity in terms of devolution and the different areas of pharmacy practice; technicians and their involvement in the Society's work; and about checks and balances on the Council's power and the influence of the Government.

MEDICINES

Crookes seeks GSL for Nurofen Cold and Flu

Crookes Healthcare is seeking to reclassify Nurofen Cold and Flu tablets (ibuprofen 200mg and pseudoephedrine 30mg) as a GS medicine because it feels wider availability would allow consumers to self-treat faster.

Individuals can readily recognise cold and flu symptoms and are confident and competent to treat themselves, the company said in application. It added that, as the onset of colds and flu is sudden, "it would be of benefit if Nurofen Cold and Flu were to be available more widely in non-pharmacy outlets".

While accepting that pharmacists' role in providing healthcare advice is invaluable, the application added that "in the treatment of uncomplicated cold and flu, most individuals will feel confident to self-treat and many will wish to treat at the earliest sign of symptoms rather than wait".

The GSL pack, which will be limited to 12 tablets, will carry advice on the correct and safe use of the product without the advice of a pharmacist, Crookes says.

Comments on the proposal should be sent by post to Amanda Lawrence, Room 14-152, Marks Towers, 1 Nine Elms Lane, London SW8 5NQ or by email: Amanda.Lawrence@mhra.gsi.gov.uk by October 30.

Pharmacist wants inquiry into 'sexed up' statement

The Royal Pharmaceutical Society has launched an investigation after a pharmacist claimed that a statement put before Council members for approval was not the same as that which was later published.

According to pharmacist Mark Koziol, the document put before Council to approve as a response to a West Metropolitan Branch motion was not the same as the 'official' Council response in the *Pharmaceutical Journal's* society pages.

He claimed the published Council response contained more than 100 extra words from the

document put before Council at its August meeting.

Mr Koziol claimed at last week's BPC modernisation debate that the document had been "sexed up", with the result that "some of the meaning and some of the intention has been changed".

The West Metropolitan Branch's motion had asked the Society to observe the modernisation principles agreed by the YPG, NPA and PSNC in any changes to its structures.

At its August meeting, Council considered a response which included the words: "The

Council has made significant progress towards identifying a new organisational model which should meet the aspirations of all those concerned about the future of our profession."

But, in the published response, this statement is not present and several sentences in it are different to the document put before Council in August, including the extra statement: "The Council's existing model was reaffirmed."

Chairing the BPC debate, David Prince, the Society's practice and quality improvement director, said the matter was a

"serious accusation" and would be investigated to see if it was a "conspiracy or cock-up".

However, a Society spokesman highlighted a *PJ* report of the Council's August meeting which suggested that the published response is correct. It says: "The Council gave its general approval to a document setting out its response to the motions carried at the branch representatives' meeting in May. Once various points raised by Council members have been taken into account, the response will be submitted to the branches and published in *The Journal*."



Novartis/Daily Telegraph Visions of Science 2003 Tom Barrick

Nurses to prescribe CDs

The Home Office has announced legislation permitting a wider range of health professionals to prescribe controlled drugs.

Under a statutory instrument due to come into force from October 15, specialist nurses will be able to prescribe diazepam, lorazepam, midazolam, codeine, dihydrocodeine and co-phenetropine for specific situations.

Furthermore, the legislation will extend Patient Group Directions to include the supply of:

- diamorphine, but only for the treatment of cardiac pain by specialist nurses in hospitals, and
- all CDs in Schedules 4 (bar anabolic steroids) and 5 of the 2001 Regulations.

This legislation follows a government proposal to extend PGD supply but is separate to an ongoing consultation to allow supplementary prescribers to issue CDs.

- Some 32 pharmacists are in the first cohort to begin training as supplementary prescribers in London this month.

Their specialities will include older people, mental health, cancer, anticoagulation and cardiac services.

Experts conclude the benefits of ETP are not clear

It is unclear to what extent costs might be offset against potential savings, or how any other benefits can actually be realised in practice, the evaluation of the electronic transfer of prescription pilots has concluded.

However, pharmacies operating prescription collection services

can expect to make time savings when the majority of prescriptions are issued electronically, the report by The Sowerby Centre for Health Informatics at Newcastle, revealed. This may release more pharmacy staff to spend more time with customers providing

healthcare advice, it says.

By the end of the ETP pilot period in June, the PPA had processed 55,947 electronic prescriptions relating to around 13,500 individual patients from 34 GP practices and 23 pharmacies.

The pilots proved that ETP is technically viable and would be

acceptable to patients, GPs and pharmacists. It also has the potential to reduce prescription fraud or irregularity without incurring major security issues.

But none of the individual pilot models run by Pharmacy2U, Flexiscript or TransScript will be used as the basis for the national ETP system. Instead, "a single 'common model' should be defined for this purpose, drawing on the experience gained from the pilots", says the report. A number of benefits, as well as costs and barriers to change (*see panel*) are identified.

The lessons learned from the ETP pilots are expected to inform the establishment of a proposed National Prescription Service which will now be charged with progressing options for a national ETP solution. ETP remains one of four key programmes outlined in the report, Delivering 21st century IT support for the NHS. One of its aims is to have a 50 per cent ETP implementation rate by the end of 2005.

The Pros of ETP

For patients:

- freedom to request repeats by telephone, internet or pharmacy visit, and reduced waiting time while items are being dispensed

For the NHS:

- savings in the process of pricing prescriptions
- cost savings for GPs
- time savings for GPs and pharmacists
- reduction in fraud
- rapid availability of good quality information on prescribing and dispensing behaviour
- development of standards to facilitate interoperability of systems, including the Integrated Care Record Service.

Barriers to progress

- Costs: Additional, major investment is needed both to address issues highlighted by the pilots and

the continuing costs of message transmissions and system maintenance.

- General benefits: Are not clear and may not be feasible in practice. Impact of ETP will not be uniform. Only pharmacies involved in prescription collection services are likely to benefit from time savings.

● Legislative change: Complete elimination of paper in the process will require a legislative change.

- Patient behaviour: It is not possible to say if the majority of patients who opted to use ETP were satisfied overall. Gaining signed permission from each patient who is to use ETP proved time-consuming. Widespread adoption by patients requires a more effective approach to gaining patient consent.

For more information:

www.doh.gov.uk/pharmacy/etpeval.htm

Minor ailments scheme tops PCTs' wish list

by Gary Paragpuri

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A minor ailment scheme has come out tops in a survey of what services PCTs would like to see community pharmacies deliver.

Nearly a third of PCTs are currently developing community pharmacy-based minor ailment schemes, while a further 45 per cent of PCTs listed it as the service they most desire in pharmacies (*see below*), according to data presented at the BPC by Keele University's Professor Alison Blenkinsopp and Webstar Health's Gianpiero Celino.

Both community pharmacy-based and domiciliary medication review featured as top priorities among PCTs, reflecting developments in the new pharmacy contract framework.

There is "clearly a high level of interest" among PCTs in developing medication reviews in the community pharmacy setting,



said Prof Blenkinsopp, but there are also concerns over time and locums. However, she indicated there was a shift away from providing medication reviews in GP practices towards offering the service in community pharmacies and in patients' homes.

The biggest drivers for progress were: the PCT and LPC relationship, the new pharmacy contract, GP support, and community pharmacy's profile in the PCT. While the top barriers

were: access to funding, the level of pharmacist resource at PCT, confidence in community pharmacy to deliver and the attitude of GPs.

Currently, 98 per cent of the 203 PCTs surveyed had commissioned at least one pharmacy service, while four fifths commissioned at least four or more services. At least one fifth of PCTs said they were not taking a proactive stance in developing community pharmacy services.

The top community pharmacy services commissioned by PCTs:

Service	Per cent
Needle exchange	79
Supervised consumption	71
Care home advice	61
Practice-based medication review	60
Smoking cessation	47
EHC by PGD	46
Compliance support	35

The top services in development at PCTs:

Service	Per cent
Minor ailments	30
Prescription intervention	29
Compliance support	20
Community pharmacy-based medication review	19
Smoking cessation	18
Domiciliary medication review	15

Top PCT aspirations for community pharmacy:

Service	Per cent
Minor ailment scheme	45
Community pharmacy-based medication review	41
Domiciliary medication review	37
Practice-based medication review	34
Compliance support	34
Prescription intervention	27

Question time

Sponsored by

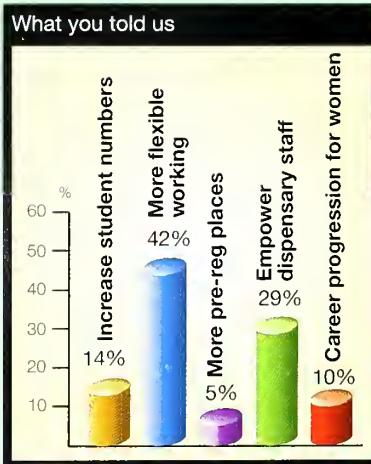


Last week we asked you: "What is the most pressing workforce recruitment and retention issue pharmacy needs to address?" You replied (see right):

This week's question: Who do you think should hold the NHS pharmacy contract?

- The pharmacist
- The individual pharmacy premises
- The pharmacy's head office

You can record your vote on our website: www.dotpharmacy.com. You have until noon on September 30 to cast your vote. We will publish the results in C&D, October 4.



Contract update

PSNC's weekly update on the new pharmacy contract.

What are the details of 'additional services' in the proposed structure of the new contract?

The provision of additional services will require training and appropriate facilities, for example a consultation area. These services will be agreed nationally and commissioned locally by PCTs. LPS and local commissioning will continue to be options available to PCTs for delivery of local services.

The services that are currently being discussed as possible additional services include:

Minor ailments management

- this service will be similar to the 'Care of the Chemist' scheme
- specified categories of patients are able to access advice and treatment of minor ailments from pharmacists at NIIS expense
- surgery time management is improved by the transfer of this group of patients to community pharmacy, in line with the objective in the new GP contract

Substance misuse services:

- supervised methadone service
- regular contact between pharmacist and user, providing opportunities for counselling
- pharmacist can refer user on to other health care professionals

Anticoagulant service:

- patients are offered convenient community pharmacy-based service for INR monitoring
- identification of dose adjustment for warfarin
- possible dose adjustment under a PGD (or supplementary prescribing)

Disease specific medicines management services:

- for at risk patients
- review of patient's medication
- lifestyle issues discussed
- agree with patient any recommendations to the GP

Other examples of additional services may include:

- diabetes screening
- CHD screening
- palliative care services
- EHC supply
- full clinical medication review
- concordance services
- out of hours service
- care home services
- domiciliary assessments
- head lice management service
- supply of gluten-free food
- needle exchange

What is the only OTC treatment for mild external ear infections?

Mild external ear

infections are a common problem with 9% of the population suffering symptoms such as itching, redness and slight

discomfort of the ear.¹ EarCalm Spray is

the only treatment you can recommend for mild external ear infections; early treatment may help prevent the infections progressing and so help

avoid unnecessary GP visits^{2,3}. Its active ingredient, acetic acid, is both antibacterial and antifungal^{2,3}.

And because it's a spray, it's convenient, easy to use and gives better coverage of the ear surfaces^{1,3} compared to drops so aiding patient compliance⁴.

EarCalm
acetic acid

EarCalm. A simple solution.



Product Information. Presentation: Non-pressurised pump action aerosol spray containing glacial acetic acid Ph. Eur. 2.0% w/w as a milky, particle free mobile liquid. **Uses:** Treatment of superficial infections of the external auditory canal. **Dosage and Administration:** Adults, children over 12 years and the elderly: One metered dose (60mg, 0.06ml) to be administered directly into each affected ear three times daily (morning, evening and after swimming, showering or bathing). Continue treatment until two days

after symptoms have disappeared, no longer than seven days. Discontinue use if there is no clinical improvement after seven days. **Contraindications, warnings, etc:** Known sensitivity to any of the ingredients. Not recommended in children under 12 years without medical supervision.

Pregnancy/Lactation: There are no restrictions to the use of the product in pregnancy and lactation. **Special Precautions:** Patients who are known to have a perforated eardrum should only use under medical supervision. If pain occurs during use, or if symptoms worsen or do not improve within 48 hours or if hearing becomes impaired, stop treatment and refer to a GP.

Pharmaceutical Precautions: Store upright in the carton below 25°C. Shake bottle before use. Before first use, prime the pump by depressing the actuator 6-10 times until a fine spray is obtained. Use within one month of first use. Avoid spraying near eyes. **Legal Category:** P. **Basic NHS Cost:** £3.80. **R.R.P.:** £6.38. **Product Licence Number:** 0036/0072. **Product Licence Holder:** GlaxoSmithKline Consumer Healthcare, 980 Great West Road, Brentford, Middlesex TW8 9GS. **Date of Revision:** June 2002. **References:** 1. Prime data. 2. Maller M et al. JAM MED AFF 1975;89:47. 3. Paulose et al. J Laryngol. 1989;103:30-35. 4. Smith RB, Moodie, J. Current Medical Research and Opinion 1990; 12,12-18. EarCalm is a registered trademark of the GlaxoSmithKline group of companies.



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A new baby rub, specially developed with baby and skin experts. Vicks BabyBalsam has been formulated with essential oils to provide comfort and easy breathing for babies and is dermatologically proven to be compatible with baby's delicate skin. Because when baby can breathe more easily, he can sleep more easily, providing much needed relief for baby (and Mum too!).

Vicks Clear & Soothe.

A new, limited edition duo pack featuring the Vicks Inhaler and a Vicks Medicated Lip Balm, providing "on the go" relief from stuffy noses and chapped lips.

Vicks Sinex MicroMist.

A re-branding of Sinex Nasal Pump, ensuring improved differentiation between Sinex Nasal Spray and the new Sinex MicroMist, to make it easier to shop.

Vicks Inhaler Active ingredients: Menthol 125mg, Camphor 50mg, Siberian pine needle oil 10mg
Indications: The relief of nasal congestion associated with allergic and infectious upper respiratory tract disorders. **Dosage and administration:** Nasal administration. Adults and children over six years: Insert Vicks Inhaler into each nostril holding other nostril closed and inhale deeply. Use as frequently as needed. Not recommended in children under six years. **Contraindications:** Use in patients hypersensitive to any of the ingredients. **Precautions, side effects and warnings:** Patient should see doctor if symptoms persist. Not to be given to children under 6 years of age. Keep out of reach and sight of children. Product licence number: PL 0129/5009R. Product licence holder: Procter & Gamble (Health & Beauty Care) Limited, The Heights, Brooklands, Weybridge, Surrey, KT13 0XP. Legal category: GSL. Price (excluding VAT): Date of preparation: November 2002.

Vicks VapoRub Active ingredients: Levomenthol 2.4%, Camphor 5.00% w/w, Eucalyptus oil 1.50% v/v, Menthol 5.00% w/w
Indications: For the symptomatic relief of nasal catarrh and congestion, sore throat, also coughs due to colds. **Dosage and administration:** Adults: Rub VapoRub liberally onto chest, soot and back, rub in well and leave clothes loose. For easy inhalation or melt two teaspoons in very hot water and inhale the vapours. Children (infants and babies over 6 months): apply lightly to the chest and back and do in well, leaving clothes loose for easy inhalation. **Contraindications:** Use in babies under 6 months of age. **Precautions, side effects and warnings:**

Patient should not swallow product or place product in nostrils. Patient should see doctor if symptoms persist or fever develops. Keep out of reach and sight of children. Product licence number: PL 0129/0130. Product licence holder: Procter & Gamble (Health & Beauty Care) Limited, The Heights, Brooklands, Weybridge, Surrey, KT13 0XP. Legal category: GSL. Price (excluding VAT): Date of preparation: November 2002.

Vicks Sinex Decongestant Nasal Spray Active ingredients: Oxymetazoline hydrochloride 0.05% w/v
Indications: For symptomatic relief of congestion of upper respiratory tract due to common cold, hayfever or sinusitis. **Dosage and administration:** Nasal administration. Adults and children over 6 years: 1-2 sprays per nostril every 6-8 hours unless otherwise advised by a doctor. **Contraindications:** Patients who suffer from high blood pressure, any heart complaint, diabetes, thyroid disease, hepatic or renal disorders. **Precautions, side effects and warnings:** Patient should see doctor if they feel worse or not feel better after 7 days, are taking other medicines, intend to become pregnant, are pregnant, are breastfeeding or if new symptoms develop. Keep out of reach and sight of children. Product licence number: PL 0129/5011R. Product licence holder: Procter & Gamble (Health & Beauty Care) Limited, The Heights, Brooklands, Weybridge, Surrey, KT13 0XP. Legal category: GSL. Price (excluding VAT): Date of preparation: April 2003.

Vicks VapoSyrup for Chesty Coughs Active ingredients: Guaiifenesin 1.333% w/v
Indications: To relieve a cough, loosen mucus, soothe and coat the throat and make the cough more productive. **Dosage and administration:** Oral administration. Adults and children over 12 years: 3 x 5ml spoonfuls. Children (6-11 years): 2 x 5ml spoonfuls. Children (2-5 years): 1 x 5 ml spoonful. Repeat every 4 hours as necessary. No more than 6 doses per day. **Contraindications:** Known hypersensitivity to guaiifenesin. **Precautions, side effects and warnings:** Do not exceed the stated dose. Do not administer to children under 2 years except on medical advice. If symptoms persist the patient should consult their doctor. Keep out of reach and sight of children. Pregnant or breastfeeding women should consult their doctor before using this medicine. May cause dryness of the mouth. **Product licence number:** PL 0129/0079. **Product licence holder:** Procter & Gamble (Health & Beauty Care) Limited, The Heights, Brooklands, Weybridge, Surrey, KT13 0XP. Legal category: GSL. Price (excluding VAT): Date of preparation: April 2003.

Vicks Sinex Decongestant Nasal Spray Active ingredients: Oxymetazoline hydrochloride 0.05% w/v
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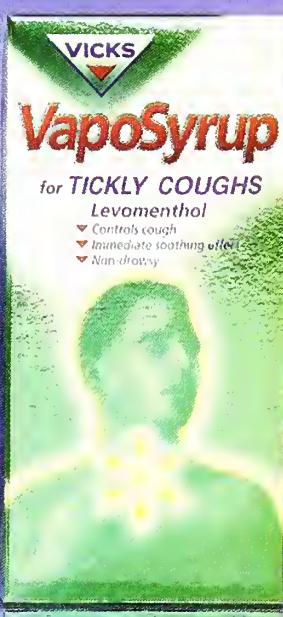
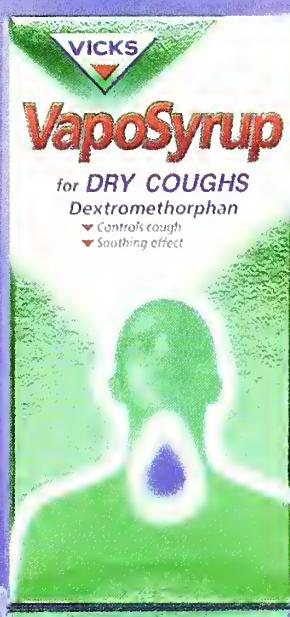
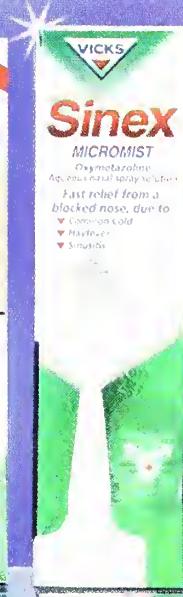
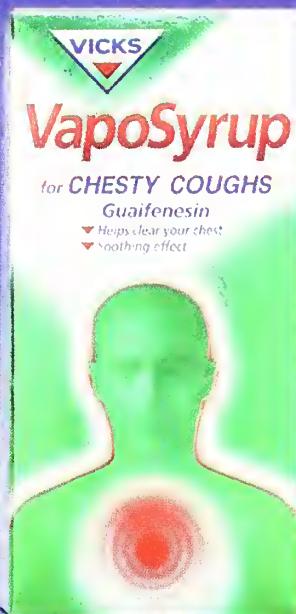
Vicks VapoSyrup for Dry Coughs Active ingredients: Dextromethorphan hydrobromide 0.05% w/v
Indications: To calm a cough and coat and soothe the throat. **Dosage and administration:** Oral administration. Adults and children over 12 years: 3 x 5ml spoonfuls. Children (6-11 years): 2.5ml (1/2 x 5 ml spoonful), every 6 hours as necessary. No more than 4 doses per day. **Contraindications:** Known hypersensitivity to dextromethorphan hydrobromide. Sever liver disease. Patients with a productive cough. **Precautions, side effects and warnings:** Do not exceed the stated dose. Asthmatics and patients with liver disease should consult their doctor before using this medicine. Do not administer to children under 2 years unless on medical advice. If symptoms persist the patient should consult their doctor. Keep out of reach and sight of children. Pregnant or breastfeeding women should consult their doctor before using this medicine. May cause dryness of the mouth. **Product licence number:** PL 0129/0079. **Product licence holder:** Procter & Gamble (Health & Beauty Care) Limited, The Heights, Brooklands, Weybridge, Surrey, KT13 0XP. Legal category: GSL. Price (excluding VAT): Date of preparation: April 2003.

doctor before using this medicine. May cause dryness of the mouth. Patients with diabetes should note that each 15ml dose contains 5.5g of sucrose. **Product licence number:** PL 0129/0078. **Product licence holder:** Procter & Gamble (Health & Beauty Care) Limited, The Heights, Brooklands, Weybridge, Surrey, KT13 0XP. Legal category: GSL. Price (excluding VAT): Date of preparation: April 2003.

Vicks VapoSyrup for Chesty Coughs Active ingredients: Dextromethorphan hydrobromide 0.05% w/v
Indications: To relieve a cough, loosen mucus, soothe and coat the throat. **Dosage and administration:** Oral administration. Adults and children over 12 years: 3 x 5ml spoonfuls. Children (6-11 years): 2.5ml (1/2 x 5 ml spoonful), every 6 hours as necessary. No more than 4 doses per day. **Contraindications:** Known hypersensitivity to dextromethorphan hydrobromide. Sever liver disease. Patients with a productive cough. **Precautions, side effects and warnings:** Do not exceed the stated dose. Do not administer to children under 2 years except on medical advice. If symptoms persist the patient should consult their doctor. Keep out of reach and sight of children. Pregnant or breastfeeding women should consult their doctor before using this medicine. May cause dryness of the mouth. **Product licence number:** PL 0129/0079. **Product licence holder:** Procter & Gamble (Health & Beauty Care) Limited, The Heights, Brooklands, Weybridge, Surrey, KT13 0XP. Legal category: GSL. Price (excluding VAT): Date of preparation: April 2003.

doctor before using this medicine. May cause dryness of the mouth. Patients with diabetes should note that each 15ml dose contains 5.5g of sucrose. **Product licence number:** PL 0129/0078. **Product licence holder:** Procter & Gamble (Health & Beauty Care) Limited, The Heights, Brooklands, Weybridge, Surrey, KT13 0XP. Legal category: GSL. Price (excluding VAT): Date of preparation: April 2003.

**INCREASED
MEDIA
£3 MILLION**
for winter 2003/04
**breathing new
life into Vicks**



Limited, The Heights, Brooklands, Weybridge, Surrey, KT13 0XP. Legal category: P. Price (excluding VAT). Date of preparation: April 2003

Vicks VapoSyrup for Tickly Coughs Active ingredients: Levomenthol 0.125%w/v. Indications: For symptomatic relief of dry, irritating cough associated with the common cold. Dosage and administration: Oral administration. Adults and children over 12 years: 10ml every 3-4 hours and maximum of 6 doses per day. Children 6-12 years: 5ml every 3-4 hours and maximum of 6 doses per day. Children under 6 years: not recommended. Contraindications: Patients hypersensitive to menthol and propylene glycol. Precautions, side effects and warnings: Patients should consult their doctor if symptoms persist for more than 7 days. If pregnant, consult doctor before use. Diabetics should consult their doctor before using this product (contains 9g sugar, present as sucrose and glucose, in 10ml dose). Product should not be given to children under 6 years unless directed by a doctor. Keep out of reach and sight of children. Product licence number: PL 0129/5008R. Product licence holder: Procter & Gamble (Health & Beauty Care) Limited, The Heights, Brooklands, Weybridge, Surrey, KT13 0XP. Legal category: GSL. Price (excluding VAT). Date of preparation: April 2003.

Vicks Medinite Active ingredients: Dextromethorphan hydrobromide 0.05%w/v, Doxylamine succinate 0.025%w/v, Paracetamol 2.00%w/v, Pseudoephedrine hydrochloride 0.20%w/v. Indications: For treatment of symptoms of the common cold, accompanied by sneezing, headache, bodyache, sore

throat, cough and nasal congestion. Dosage and administration: Oral administration. Product to be taken at bedtime. Adults (including the elderly): 30ml in dosing cup provided. Children 10-12 years: 15ml in dosing cup provided. Not recommended for children under 10 years of age. Contraindications: Patients with one or more of the following conditions: cardiovascular disorders (including hypertension), thyroid disease, diabetes, or monoamine oxidase inhibitor therapy; severe hepatic or renal insufficiency. Known hypersensitivity to any of the ingredients. Precautions, side effects and warnings: Do not administer to children under 10 years except on medical advice. Do not exceed stated dose. Keep out of reach and sight of children. Contains paracetamol. Do not take with other products containing paracetamol. May cause drowsiness. If affected do not drive or operate machinery. Avoid alcoholic drink. If symptoms persist consult your doctor. If you are under the care of your doctor or receiving prescribed medication, consult your doctor before using this product. Prolonged use without medical attention is not advisable. Contains alcohol. Product licence number: PL 0129/ 0029R. Product licence holder: Procter & Gamble (Health & Beauty Care) Limited, The Heights, Brooklands, Weybridge, Surrey, KT13 0XP. Legal category: P. Price (excluding VAT). Date of preparation: April 2003.

VICKS

Wales will start script charge abolition next year

A reduction in prescription charges in Wales will take effect in the next financial year as the first stage to abolishing them by 2007.

First Minister Rhodri Morgan confirmed existing fears that the Welsh government does not have enough money to end the £6 charge all in one go. Details of the abolition scheme will be announced next month, according to a senior civil servant.

As the National Assembly reconvened in Cardiff after its

summer recess, Mr Morgan launched his government's four-year Agenda for Action in which abolishing the charge – already lower than that in England – was listed as the first of his top 10 commitments.

Mr Morgan was immediately forced to defend whether a proposal which would largely benefit the middle classes was the best way to spend £31m a year.

"You can always ask this about any provision of universal

services; the balance is always tricky," he said.

The argument, which led to the proposal being included in the manifesto, was based upon getting people off benefit and back into work.

The first job for such individuals would be likely to be low paid, said Mr Morgan, and the cost of prescriptions would prove for some the balance which means it is not worth going back to work.

POLITICS

MPs targeted

There are three challenges facing pharmacists who want to participate in healthcare evolution, a senior Boots' director has told health ministers this week at party conferences.

Medical director Graham Marshall said access and choice, pace and scale, and technology are barriers to pharmacists' success in the NHS.

Healthcare professionals want to share some of the burden of chronic disease management but this is against a backdrop of no charge to see a GP and the fact that 80 per cent of prescriptions are free, he believes.

And pilots exploring ways of delivering care for patients need to be larger, involving groups of PCTs in conurbations the size of Manchester or Birmingham.



Alastair Robbie, principal pharmacist, medical and research at Guy's & St Thomas NHS Trust, collected the NPA of P Pharmacists award for 2003, sponsored by MSD, on behalf of colleagues June O'Brien, Chimay Chughtai and Duncan McRobbie. Their project, Smoking cessation pharmacists services: development of continuous care between secondary and primary care, aims to develop a robust system for delivery of advice underpinning smoking cessation from hospital to the community. Alice is thanked by GHP president Alison Soni, at last week's BPC chairman Alastair Soni, at last week's BPC

PSNC

Ballot expected on contractors' services

PSNC plans to ballot contractors within the next month to see what services they will be prepared to offer under the new contract.

Chief executive Sue Sharpe said the results of the ballot would help in negotiations with the government.

"We need a strong signal from contractors that, if the money is right and the environment is right [in terms of control of entry], they will be prepared to take on these valuable extended roles in the future."

But, although discussions with the DoH and the NHS

Confederation have started on the new contract's financial arrangements, PSNC is still concerned about the four exemptions to the control of entry proposed by the government, namely:

- consortia intending to open a one-stop primary care centre
- pharmacies intending to open for more than 100 hours a week
- shopping developments over 15,000sq m
- mail order or internet-based services.

Mrs Sharpe said: "We're working to ensure we get the tightest and

clearest definitions [of what constitutes each of the exemptions] so we don't end up with numerous loopholes for people to exploit."

One of the main concerns is that the exemptions will lead to pharmacies clustering around GP surgeries.

PSNC will, with the NPA, commission an expert analysis of the likely effect of the exemptions. Among evidence put to the government will be an OFT study showing that clustering declined in the years following control of entry.

PRODUCT INFORMATION:

NUROFEN FOR CHILDREN and NUROFEN FOR CHILDREN

SINGLES: Suspension of ibuprofen 100mg/5ml. Indications: Reduction of fever, and relief of mild to moderate pain. Dosage: 20-30mg/kg bodyweight in divided doses. achieved as: Infants 6-12 months: One 2.5ml spoonful taken 3 to 4 times in 24 hours. Children 1-3 years: One 5ml spoonful taken 3 times in 24 hours

4-6 years: 7.5ml (5ml + 2.5ml spoonful) 3 times in 24 hours. 7-9 years: Two 5ml spoonfuls 3 times in 24 hours. 10-12 years: Three 5ml spoonfuls 3 times in 24 hours. Not suitable for children under 6 months of age unless advised by doctor. For oral administration. For short term use only. Contraindications:

Hypersensitivity to any of the constituents. Patients with a history of, or existing peptic ulceration. Patients with a history of asthma, rhinitis or urticaria associated with aspirin or other non-steroidal anti-inflammatory drugs. Precautions and Warnings: If symptoms persist for more than 3 days, consult doctor. Do not exceed the stated dose. Caution is required in patients with renal, cardiac or hepatic impairment. Asthma sufferers, anyone allergic to aspirin, receiving any other regular treatment and pregnant women should consult their doctor before taking Nurofen for Children or Nurofen for Children Singles. Nurofen for Children and Nurofen for Children Singles are not suitable for patients who have a stomach ulcer or other stomach disorder. Side Effects: Hypersensitivity reactions including (a) non-specific allergic reaction and anaphylaxis, (b) respiratory tract reactivity comprising of asthma, aggravated asthma, bronchospasm or dyspnoea, or (c) assorted skin disorders, including rashes of various types, pruritis, urticaria, purpura, angioedema and, more rarely, bullous dermatoses (including epidermal necrolysis and erythema multiforme). Side effects rare, may include abdominal pain, nausea, dyspepsia and gastrointestinal bleeding and peptic ulceration. Also very rarely thrombocytopenia. Bronchospasm may be precipitated in patients with a history of aspirin sensitive asthma. Product Licence Holder: Crookes Healthcare Limited, NG2 3AA. Product Licence Number: PL 00327/0085. Legal Category: P. MRRP: Pack size 100ml: £3.49 Pack size 150ml: £4.59. Product Licence Number: 00327/0140. Legal Category: GSL. MRRP: Pack size 8 sachets x 5ml: £2.79 Pack size 16 sachets x 5ml: £4.99. Date of preparation: August 2003. NFN570



Nurofen for Children provides up to 8 hours effective fever relief in babies – up to 2 hours longer than any paracetamol suspension, and long enough to last all night long. It's also available in the very latest, convenient formats. When you need long-lasting, effective fever relief, Nurofen for Children's got it.

For up to 8 hours fever relief

 NUROFEN®



Boots calls staff back to the floor

Boots is looking to recruit an extra 5,000 people to work in its stores in the run up to Christmas and is inviting all 3,000 of its head office staff back to the floor to help out.

The extra staff will be spread across the country as the shops prepare for their busiest time.

Boots' chief operating officer David Kneale said: "Christmas is our busiest season and we want to recruit now so people can receive the training they need in retail skills."

Boots offers full training for new recruits and benefits include a staff discount of up to 22.5 per cent and competitive rates of pay. It is also extending its back-to-the-floor campaign for office-based staff which last year saw 600 people take up the challenge.

The expectation is that people will work from two or three days to a week at a store to help with the Christmas rush.

WHO's report on NICE: good, but could try harder

by Fiona Salvage

fsalvage@cmpinformation.com

The World Health Organization has told the NHS drugs review body to make its dealings with the pharmaceutical industry more public.

The WHO report says the National Institute for Clinical Excellence should push for greater transparency in its dealings with drugs companies in order to gain greater credibility.

The comments appear in the WHO's analysis of NICE's process of technology appraisal.

The Association of the British Pharmaceutical Industry is sceptical about how far the issue of transparency can go, saying "there will always be elements ... that will have to remain commercially confidential".

NICE could provide information to NHS Trusts on the budget impact of its decisions, says the WHO, something which

it does not currently do.

According to the report, this would provide useful information to the Trusts and avoid duplication of effort in making budget analyses for implementing NICE's proposals.

The WHO also highlighted NICE's appeals procedure as being time-consuming and expensive.

Criticising the number of appeals lodged against NICE's decisions and the length of time taken by the appeal process, WHO recommended that NICE should consider how to reduce the number of appeals and the length of the process.

Dr Trevor Jones, the ABPI's director general, agreed – with reservations.

"While there might be sympathy for speeding up the appeals procedure, it is clearly vital that the accuracy of the decision is not impaired," he said.

Dr Jones added: "One way of

reducing the number of appeals would be through instituting better and earlier dialogue with interested parties, and this would be welcomed".

The WHO did praise NICE's "well-deserved reputation for innovation and methodological developments".

Kees de Joncheere, a member of the WHO review team, said: "Published NICE appraisals are already being used as international benchmarks – an obvious recognition of their credibility".

Professor Sir Michael Rawlins, chair of NICE, commented: "The report makes helpful suggestions about how our processes and procedures might be enhanced and the board will give this careful consideration.

"The Institute will take the WHO recommendations into account in its current review of appraisal process and methodology," he added.



PLATINUM DESIGN AWARDS

Have you redeveloped your pharmacy since January 2002? Would you like to win the UK's most prestigious pharmacy design Award – and the top £2,500 prize?

There's also a special trophy for best entry from a multiple pharmacy business.

To find out more and for an entry form, call Jan Powis on 01732 377487 or see your Ceuta representative.



The First Choice

The UK's leading healthcare partnership



A Division of the Ceuta Group



Fotoview offers developing and printing alternative

Fotoview has launched a national photo developing and printing service under new branding.

The London company claims to be the only one offering pharmacies a personalised, own-brand facility or the opportunity to use its new imagery.

It says this will give pharmacies the opportunity to raise their own profiles and retain an identity in a marketplace which is increasingly dominated by Kodak.

Fotoview's managing director, Jagdeep Shah, said: "Everything is in place to offer retailers a credible alternative.

"We have the national sales and marketing infrastructure to support and develop our customers' individual needs and to help them take market share from their high street competitors.

"Additionally, our unique range of digital solutions will allow our partners to maximise this exciting new growth opportunity."

The acquisition of a laboratory in Keighley, Yorkshire, has added a



northern processing facility to the company's London laboratory and Midlands distribution centre. It has also spent £1 million in digital technology in order to deliver an overnight D&P service nationwide to meet the needs of customers using conventional film and digital media.

INDUSTRY

Oxford BioMedica raises £20m

Oxford BioMedica hopes to raise more than £20 million through a rights issue, allowing it to fund its oncology and neurotherapy drug portfolios.

Shareholders will receive 27 new shares for every 50 existing shares they own if they approve the rights issue at an extraordinary general meeting.

Professor Alan Kingsman, Oxford BioMedica's chief executive, said: "The strengthened cash position should enable Oxford BioMedica to reach key clinical milestones and improve the prospects of securing optimal licensing agreements on the lead products."

Of the £20.4m it plans to raise, Oxford BioMedica has earmarked 51 per cent for its oncology programme and the rest for its neurotherapy drug candidates.

Oxford BioMedica reduced its operating expenses earlier this year to make savings.

Straight in at No. 1



Following a highly successful launch campaign, including nationwide TV, Canesten Oral is now the fastest growing and most popular treatment for thrush, with a market share of 27%.¹

**Canesten Oral is back on TV in November so
stock up now to avoid disappointment**

Product Information for Canesten® Fluconazole Oral Capsule. Presentation: **Canesten® Fluconazole Oral Capsule** contains 150mg fluconazole. **Indications:** Treatment of candidal vaginitis, acute or recurrent. Also for treatment of partners with associated candidal balanitis. **Dosage and Administration:** Adults (16 – 60 years): One capsule. **Contraindications:** Hypersensitivity to fluconazole, related azole compounds or any of the excipients; co-administration with terfenadine or cisapride; pregnancy and breast feeding. **Warnings and**

Precautions: Adequate contraception necessary. A physician should be consulted if the patient or partner have had exposure to a sexually transmitted disease, or if the patient: Has had more than two infections of thrush in the last six months; is taking any medicine other than the Pill; has any disease or illness affecting the liver or kidneys or has had unexplained jaundice; suffers from any other chronic disease or illness; is uncertain of the cause of symptoms; has abnormal or irregular vaginal bleeding or a blood-stained discharge; has vulval or vaginal sores, ulcers or blisters; has lower abdominal pain or dysuria. In men, medical advice should be sought if: Sexual

partner does not have thrush; they have penile sores, ulcers or blisters; there is abnormal penile discharge; penis has started to smell; dysuria. Patients should consult their doctor if symptoms have not been relieved within one week. **Side-effects:** Nausea, abdominal pain, diarrhoea and flatulence. Rarely rash, headache, hepatotoxicity and anaphylaxis. **Cost:** £12.50. **MA Number:** PL 00010/0282. **MA Holder:** Bayer plc, Consumer Care Division, Newbury, Berkshire RG14 1JA. **Legal Category:** P. **Date of Preparation:** February 2003. **Reference:** 1. IRI: Value share – four weeks ending 10th Aug 2003.

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MHRA defends procedures for pre-vetting adverts

by Ailsa Colquhoun

acolquhoun@cmpinformation.com

The Medicines and Healthcare products Regulatory Agency (MHRA) has defended its procedures for pre-vetting adverts for prescription products despite three adverts being withdrawn within a year after investigation by the *Drug & Therapeutics Bulletin*.

This week, the MHRA said: "The allegations of the Consumers Association are not supported by the facts. In all three cases cited, the MHRA acted rigorously and effectively in response to healthcare professionals.

"The control of medicine advertising in the UK is based on a long-established system of self-regulation underpinned by statutory powers administered by the MHRA.

"Given the volume of

medicines advertising material, the MHRA in part relies on concerns being drawn to its attention in order that regulatory action can be taken.

"The Agency investigates urgently all complaints about advertising material, from whatever source, and takes effective action as appropriate.

"The Agency carefully targets pre-vetting of advertising at cases where a particular risk has been identified, according to published criteria.

"Agency scrutiny of published advertising is closely targeted at newly-licensed products to obtain early assessment of the initial claims made in advertising, with a view to identifying any cases where further action is indicated.

"Where scrutiny or a complaint indicates a problem with early advertising for a new product, pre-vetting of future material is always considered.

The Consumers' Association, which publishes the *DTB*, said: "The MHRA must be more robust and vigilant in taking charge of policing the pharmaceutical industry."

The *DTB* claims its first advertising victory came in December when Schering was forced to withdraw material promoting its Yasmin contraceptive as "the pill for wellbeing".

In May, the *DTB* slammed Novartis for using a baby to advertise its pimecrolimus cream, which carries a licence only for children aged over two.

The CA added: "This poses further questions as to the effectiveness of the body responsible for vetting such adverts, the Medicines and Healthcare Regulatory Agency, to fulfil its remit as the pharmaceutical industry watchdog."

Coming Events

THURSDAY OCTOBER 2

RPSGB Hounslow Branch

'Hounslow pharmacy needle exchange scheme' with Sam Pisano, Pharmacy Needle Exchange Scheme Co-ordinator. 7.30 for 8pm Buffet. Education Centre, West Middlesex University Hospital, Twickenham Road.

RPSGB Weald of Kent Branch

'Wound management' with Paul Warley, Convatec. 7.30 for 8.15pm at the Ramada Jarvis Hotel, Pembury TN2 4QL.

ADVANCE NOTICE

OCTOBER 19

RPGSB Chiltern regional conference.

Aims to examine the public health perspective as well as update developments in the treatment of Alzheimer's disease, psychoses and Parkinson's disease. £25 per person. Will provide 5.5 hours towards the College of Pharmacy Practice's continuing education requirement. Ramada Jarvis Hotel, Hatfield. For information: E-mail jcruffle@aol.com Tel: 0118 969 2510

No Baycol class action for Bayer

Bayer will not face a class action lawsuit on Baycol (Lipobay, cerivastatin) following a US federal court ruling in the company's favour.

Bayer said in a statement that it was "pleased" that the Federal District Court in Minneapolis, Minnesota, ruled against the motion for a nationwide class action in the Baycol case.

The company said that a class action was not appropriate for the Baycol case because there were "too many diverse and individual issues" involved with the claims.

These include patients' medical histories, using Baycol with other drugs, Baycol dosages and differences in state laws.

Bayer said it would continue to pursue its policy of "trying to agree on fair compensation for anyone who experienced serious side effects from Baycol on its own initiative and without acknowledging any legal liability".

So far Bayer has settled 1,342 cases in the US.



INDUSTRY

GSK to axe 50 R&D jobs

GlaxoSmithKline is cutting 50 jobs in its UK and North American pharmaceutical development departments, despite growing its overall R&D budget.

David Mawdsley, GSK's director of UK corporate media, said: "GSK's R&D continues to reshape itself with the goal of being the most productive research and development company in the industry.

"Changes are constant in different areas in terms of setting budgets, but displaced staff will be redeployed where possible within GSK." The company

opened a new R&D facility in Spain in May and has invested £40 million in a new ultra-high throughput screening facility in Harlow to be opened next month.

GSK has won its appeal in the USA against generics company Andrx Corporation to stop it producing copies of its bupropion hydrochloride drugs, Wellbutrin SR for depression and Zyban for antismoking. GSK is still appealing against decisions concerning other generics firms Canada and the USA for its antidepressant Seroxat (paroxetine).

INDUSTRY

Reducing CO₂ emissions

GlaxoSmithKline's Primary Supply operation is the latest pharma company to team up with the Carbon Trust in an energy efficiency partnership as part of a bid to reduce energy use and carbon dioxide emissions at six of its UK manufacturing sites.

Carbon Trust is a Government-

backed organisation that provides UK businesses and industry with advice on reducing carbon emissions.

In June it teamed up with Boehringer Ingelheim Group in a pilot study to improve its management of carbon dioxide emissions.

For more information: www.thecarbontrust.co.uk

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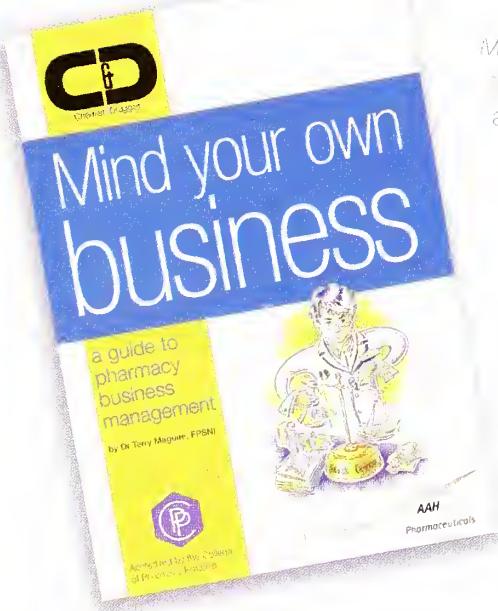
Pharmaceuticals

and

VANTAGE *pharmacy*

Mind your own business

You have been given the tools – now reap the benefit



Mind Your Own Business, delivered free with last week's C&D, contains the complete and unabridged series of 'Business Matters' articles written by pharmacist Dr Terry Maguire which have run in C&D over the past year. In the book, Dr Maguire expands on each of the 10 subject areas to provide anyone involved in running a pharmacy business with advice on management techniques and style, as well as some practical tips to make your business work better.

Sponsored by AAH Pharmaceuticals and Vantage Pharmacy, *Mind Your Own Business* has been accredited by the College of Pharmacy Practice as an appropriate tool for continuing professional development. And, to help subscribers reap the benefits of the advice contained in the book, C&D is offering a CPD registration service.

Extra copies are available at £12.99. Discounts available on bulk orders. Call 01732 377269 for details.



Mind Your Own Business has been reviewed by the College of Pharmacy Practice and determined to be appropriate for continuing education within a planned cycle of continuing professional development. Each chapter and associated questions is worth 1.5 units towards the College's CE requirement.

Register for 15 hours of continuing education credits

Please register me for the *Mind Your Own Business* telephone marking service. I enclose a cheque for £12 made payable to CMP Information.

PLEASE PRINT CLEARLY IN BLOCK CAPITALS

Name: _____

Address: _____

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Date: _____

RETURN THIS FORM TO: Mary Prebble, Pharmacy Projects, CMP Information Ltd, Sovereign House, Sovereign Way, Tonbridge, Kent TN9 1RW.

Pharmacists who wish to register for the *Mind Your Own Business* telephone marking service and who require a proof of learning should complete the form on the left and send it with a cheque for £12 (made payable to CMP Information Ltd) to Mary Prebble, Pharmacy Projects, CMP Information Ltd, Sovereign Way, Tonbridge, Kent TN9 1RW. Alternatively, payment can be made by credit card by phoning 01732 377269.

On receipt of your cheque you will be issued with a personal identification number that will give access to the telephone marking service and allow you to record the answers to the questions following each chapter. To use the telephone marking service you will need access to a touch tone telephone. Calls are charged at standard national rates. Phone lines will remain open until September 30, 2005.

Comment

from the Editor

The independent report on electronic transfer of prescriptions gives the impression, on first reading, that it could have been written at any time before, during or after the ETP pilots were in operation last year.

It comes to some conclusions that are not particularly startling and could have been foreseen – ETP might save time and money; the people who used it found ETP an acceptable form of delivering prescriptions; and the nature of the pilots meant that not all the outcomes were as definitive as would have been hoped.

Oh yes, and ETP is technically viable (is it naïve to think that, given the march of progress, what IT dream isn't?).

What the report doesn't do is make a recommendation on the topic that was exercising the health professions in the years leading up to ETP over the direction of prescriptions. Still, it seems the compromise of some prescriptions being 'pushed', and others 'pulled' into pharmacy systems will finally occur, so that all patients and practitioners in all parts of the community will be able to benefit from the system.

As for the companies who invested a great deal of time and

effort and money in setting up the pilot systems, there is a sense that the Department of Health could have done more to acknowledge the contribution they made – especially as the NHS is looking for a greater private/public partnership.

But they have to hang on to the hope that the integrated care record service will be sorted out soon to allow services such as ETP to be added to the NHS IT smorgasbord. This emphasis on putting the patient record at the core of everything that goes on within the NHS makes sense as the bigger picture emerges. Once achieved, and when community pharmacy eventually gains access to the NHSnet, there will be a greater sense of professional satisfaction and appreciation by the public and NHS about what pharmacy really can do.

This emphasis on putting the patient record at the core of everything that goes on within the NHS makes sense

Your views

Ayurvedic practitioners criticise the Herbal Medicine Regulatory Working Group's recent report

A flawed approach to Ayurveda regulation

The British Medical Ayurvedic Council welcomes the regulation of Ayurvedic medicines and congratulates the HMRWG on its dedicated work.

However, thousands of qualified Ayurvedic practitioners in India and the small number of Ayurvedic practitioners in the UK – as well as GPs and NHS hospital consultants in the UK – have criticised serious shortcomings in the educational curriculum and the lopsided regulatory structure recommended by the HMRWG which was dominated by a group of western herbalists with their own agenda.

Only 10 per cent of Ayurveda is herbal medicine. Ayurveda in the UK cannot be represented by western herbalists, only by qualified Ayurvedic practitioners, educationalists and informed lay members with involvement from

the UK ministries of health.

In the opinion of Ayurvedic doctors and NHS GPs and consultants, the regulatory structure proposed by the HMRWG will lead to serious danger to the public who are already suffering from a deluge of unqualified Ayurvedic practitioners.

These proposals are also unethical as they lead to the dilution of knowledge and intellectual property of more than 500,000 Ayurvedic doctors in India who have studied for over five and half years to get a proper university degree.

The main shortcomings of the report are:

- The reduction of the education and training for Ayurveda from 6,000 hours to a mere 450 hours. This will seriously endanger patients' safety.
- A mishmash of a regulatory

structure that will allow western herbalists the control of a Herbal/CAM Council. This will inevitably legitimise unqualified practitioners and even allow such charlatans to set up so-called 'accredited courses in Ayurveda'.

Ayurveda is only 10 per cent herbal medicine and western herbalists are not competent to regulate this complex system that covers many other therapies, including panchakarma (detoxification procedures) and yoga.

- Theft of intellectual property of Indian Ayurvedic doctors.
- Ignoring Sanskrit, the language of Ayurveda, and the philosophy of Ayurveda on the recommended core curriculum is like teaching western medicine in Hindi or Tamil and not English.
- A Herbal/CAM Council driven by economic considerations will allow a range of disparate

therapies to become part of it and this would allow the siphoning off of parts of Ayurveda like shirodhara and panchakarma to be practised by unqualified practitioners.

This is the area that would pose the greatest danger to public health as these are serious treatments that can cause major problems to patients if administered incorrectly or inappropriately.

A minority report highlighting our concerns is available from the BAMC.

If you wish to have a copy, please telephone Mrs Jassal on 020 7224 0908.

Dr Shrikala Warrier, director – academic affairs, British Ayurvedic Medical Council.

Deepika Guawant, president, British Association of Accredited Ayurvedic Practitioners.

INDUSTRY VIEWPOINT

Class of 2008

The summer holidays are over, autumn is in the air and a new academic year has begun. All over the country fresh faced, eager young students are starting their degree courses. For those electing to read pharmacy, what will be on offer when they qualify in 2008 following four years as an undergraduate and a further year in pre-registration?

This generation of pharmacy undergraduates will have been raised and educated in the age of digital information. They are comfortable with computing and the power of the internet.

The class of 2008 will not accept a repetitive dispensing role and certainly will not expect to be confined to one working premises.

Changes in roles and responsibilities for pharmacy that have been piloted are now being introduced. Schools of Pharmacy and all those teaching pharmacy undergraduates must rise to the challenge to impart wider skills and enhanced abilities appropriate to pharmacy in a new age.

Those teaching must impart skills and enhanced abilities for pharmacy in a new age

The class of 2008 has been raised in a 24-hour society where consumers increasingly expect to get what they want, where and when they want it. Improved access to healthcare will only be achieved by a more efficient deployment and use of healthcare professionals.

The class of 2008 will know that consumers have been encouraged towards self-care and are more knowledgeable and confident. Government and regulators are keen to support this trend through deregulation; POM to P, P to GSL and very recently the range of conditions for which advertising to the consumer will be allowed.

For the class of 2008 the future should be bright, full of challenges, excitement and opportunities.

Written by a senior industry manager

TOPICAL REFLECTIONS

MHRA application is a reclassification too far

"Do not take if you have a history of stomach ulcer, heart problems, high blood pressure, thyroid or prostate conditions, diabetes or glaucoma."

To me this drug sounds potentially dangerous, with risks that at the very least should require it to be sold under the supervision of a pharmacist. But Crookes Healthcare disagrees. They consider it so safe that they have applied to the Medicines and Healthcare products Regulatory Agency for Nurofen Cold and Flu tablets to be reclassified as GSL when sold as a pack of 12 tablets.

One of my major professional roles is to ensure the appropriateness of all the drugs I sell. In the space of a few weeks the MHRA has received applications for P to GSL from Bayer for Canesten Combi, Galpharm for Cetirizine Liquid and now Crookes Healthcare for Nurofen Cold and Flu. I am being made to feel like a fool by the pharmaceutical industry, with this last application the final straw.

Pseudoephedrine is a drug that I always carefully counsel before selling and when combined with ibuprofen I am doubly cautious. Having gone through the various reasons for not taking the preparation I am often greeted with a no thank you even when the customer is perfectly fit! No rational thinking agency could possibly accept that Nurofen

Cold and Flu should be GSL yet I fear that whatever the strength of argument this application will merely follow the precedent of past history.

The industry wants a United States situation where P medicines do not exist and the Government's politically motivated policy of easier access for the consumer is aiding that ambition. The result is an unholy alliance that now threatens the *raison d'être* of community pharmacy and contradicts the publicly aired support and praise from Government for our essential role.

Merely replying to the formal consultation from the MHRA is not enough because their powers are too weak and narrow. They are only concerned with safety and cannot refuse an application for reclassification on professional grounds.

The problem lies firmly with the Government because if their support for the essential role of the community pharmacist is to have any relevance then they need to change the terms of reference under which the MHRA works. But time is vital and vocal representations for change must be made now, not to the MHRA but direct to the Department of Health. The reclassification of pseudoephedrine is a drug too far. If allowed it will open the floodgates to the unregulated sale of medicines and make one of my major professional roles irrelevant.

How about backdating training funds, Minister?

A properly trained workforce must be the ambition of all pharmacists, so the promise by health minister Rosalie Winterton at the British Pharmaceutical Conference to make available an initial £1 million for the training of technicians was indeed welcome (*C&D, September 20 p5*).

However this is money for the new contract so does not address the needs of those conscientious pharmacists presently engaged in training their technicians.

I have just registered two members of my staff on the National Pharmaceutical Association's NVQ course for technicians at a cost of £450 per annum for each trainee. Assuming that they both complete NVQ3 that is a total investment of £2,700 over the three years, none of which I had expected to be NHS funded. My local primary care trust considers training money for community pharmacists a low priority, preferring instead to lavish all their funds on protected training time for GPs and their staff.

The promised £1m is therefore doubly welcome but it needs to be an ongoing commitment to training that as well as becoming an integral part of the new contract can also be retrospectively applied to those pharmacists already providing their technicians with training facilities.

In fairness to my staff I could not delay their courses until I was certain that I would be reimbursed. But now that money has been promised a formula must be found whereby those pharmacists who have already committed funds to the training of technicians are also fairly reimbursed.



The way towards a patient-centred service

A community pharmacist in Middlesex has redesigned his pharmacy to fit the needs of his patients after asking them which services they valued most.

The priority was to create the right environment to deliver services such as medicines management and to promote self-care, Riaz Esmail, a community pharmacist from Edgware in Middlesex, told BPC delegates.

In addition, Mr Esmail applied for an LPS scheme, under which he plans to offer a medicines management service for older people. This is important he said because "it's about being paid for services for which we feel we should be paid", he said. "Under LPS we're performance managed and paid for our input."

Mr Esmail intends to hold 150 medicine management sessions annually for elderly patients on long-term medication. Advice for carers, compliance device assessments and the development of intermediate care strategies will all form part of the service.

However, Mr Esmail stressed that one isolated pharmacy providing extended services is "not the solution". He intends to share best practice learned from the LPS, and aims to hold 50 meetings annually to share information with local pharmacists.

Problems that Mr Esmail found in setting up the venture included the PCT's confidence in pharmacists; GPs' concerns over patient consent, confidentiality and sharing records; and Mr Esmail's own self-doubt as a single-handed practitioner.

As part of the redesign, he received permission to brand the pharmacy with the NHS logo. He also has a consulting room, self-selection medicines, accredited dispensing technicians, internet access for patients and a library of books, cassettes and CDs.

In addition, all the shop's shelving units are on castors allowing the floor to be cleared easily to allow meetings to take place in the evenings.



Pharmacy practice: What the... Riaz Esmail

Fake drugs 'unlikely' via pharmacies

There is no evidence that counterfeit drugs are getting into the legal supply chain in the UK, said Dr Ged Lee, from the Medicines and Healthcare products Regulatory Agency.

Most fake medicines seized in the UK have been supplied illegally, he told the conference. They tend to be limited to lifestyle drugs, mostly counterfeit Viagra, of which 250,000 have been seized from various sources this year. Other common examples are antidepressants supplied on the club scene and steroids sold through gyms for body-building.

Dr Lee was confident the MHRA had such an extensive surveillance programme, involving sampling medicines in pharmacies, that if fakes had crept into the legal supply chain they would have been detected by

now. Patients obtaining prescriptions legally and getting them dispensed by pharmacists were unlikely to be at risk.

Examples of fakes from illegal sources included 'sildenafil' containing caffeine or built up with lactose to look like Viagra, anabolic steroids containing no active ingredient, and 'Nubain' in a multidose vial with a reduced

nalbuphine content and less than the required amount of preservative. The latter is used by body-builders to exercise for long periods without pain.

Dr Lee explained how the International Laboratory Forum on Counterfeit Medicines had been set up to fight the problem. Besides the UK, the forum included representatives from the USA, Australia, Canada, the

Netherlands, Germany and Singapore. The forum is using sophisticated analytical techniques to develop 'footprints' of genuine active pharmaceutical products so fakes can be more easily identified.

Earlier Dr Dora Akunyili, the pharmacist chief executive of the Nigerian Food and Drug Regulatory Agency, described the inroads her organisation had made into combatting the corruption and inadequate legislation that had led to serious counterfeiting problems in developing countries.

Part of the agency's anti-fake drug campaign involved showing pictures on television of counterfeits next to genuine medicines, to alert the public. During the campaign threats on her life were made and her office were vandalised by the criminal network involved.



Most fake medicines seized in the UK have been supplied illegally

Dr Ged Lee

Children's health a key target

Community pharmacists must develop services for improving children's health, as it will become a key area in the future as commissioning bodies increasingly focus on children's healthcare services.

Pharmacists must work in partnership with other stakeholders to develop their role in the field of children's health through existing networks, the NPA's NHS Service Development head Georgina Craig told BPC delegates.

Young mothers and children are high users of community pharmacy and represent an important area for pharmacists, Ms Craig said. She identified several areas in which pharmacists

could get involved to improve services available to children and mothers. These included the public health initiative Sure Start, teenage pregnancy, the Children's NSF and education.

Sure Start, which targets disadvantaged areas, aims to make healthcare services more accessible and focuses on issues such as smoking, infections, low birth weight babies and increasing access to health information. Pharmacists should find out if a Sure Start project is in their locality, as opportunities exist for providing services and information on nutrition, smoking cessation, breast-feeding and signposting to other health services, said Ms Craig.

Pharmacists can also play a role in increasing access to EIIC, contraception, pregnancy testing and drug interaction counselling. Community pharmacies are an ideal setting for these services as they are open long hours and offer a degree of anonymity because

they look like shops and not clinics, suggested Ms Craig.

In terms of the Children's NSF pharmacists could help in areas such as chronic illness management, maternity services, mental health, well being and the use of medicines.



Young mothers and children are high users of community pharmacy

Georgina Craig

Stop children's data being wasted

A lack of money rather than ethical concerns is the reason why clinical trials are not carried out in children, according to Dr Ian Chi Kei Wong, director of the Centre for Paediatric Pharmacy Research at London's School of Pharmacy.

However, for drugs that have been in use for some time a lot of clinical information already exists, and Dr Wong believes that pharmacoepidemiology systems can be used to collect this data to allow the assessment of clinical outcomes.

As an example, he cited the use of antidepressants in children and demonstrated that by analysing the number of children and whether they were male or female, it was possible to deduce for what

indication the drugs might be used.

For tricyclic antidepressants, peak usage in boys occurred in the age range 7 to 9 years, while for

girls, usage peaked in the 17 to 18 year range. This suggested the drugs were indicated for enuresis in boys and depression in girls.

In the case of SSRIs, usage was mainly in the 17 to 18 age bracket, suggesting the drugs were used to treat depression but another possibility was pain relief.

Dr Wong called for better recording and monitoring of drug use in children. Information collected by following up patients over long periods could be used to build databases of clinical outcomes.

It is not unethical to give children medicines, said Dr Wong, but it is unethical not knowing how safe or effective the drugs are for them.

CPD decision time in 2005

Pharmacists will have to decide, probably mid-2005, whether they wish to be classed as "practising" or "non-practising" pharmacists for the purposes of continuing professional development.

The decision will have a bearing on the retention fee for 2006, Robert Dewdney, the Royal Pharmaceutical Society's head of education, told BPC delegates. A third option will be to leave the Register altogether.

Dr Dewdney said the Department of Health is expecting to have an Order in place by the end of November 2004, making CPD mandatory.

Studies needed on child and adult drug differences



Children should not be viewed as small adults

Prof James McElnay

More money is needed to study the different responses of children and adults to the same drugs.

This will help with the current treatment dilemma healthcare professionals face when treating children with unlicensed and 'off-label' drugs, according to Professor James McElnay from Belfast's Queen's University.

While it is not desirable to treat children with unlicensed and thus untested drugs, it is also not appropriate to withhold treatment that may potentially help, he told BPC delegates.

Currently there is a 50 per cent

incidence of unlicensed drug use in paediatric patients in hospitals, and 60 per cent in specialist hospitals.

However, in seriously ill neonates, this figure rises to 90 per cent, Prof McElnay said.

Children should not be viewed as small adults as they can depict different rates of drug absorption, elimination, distribution and metabolism, highlighted Prof McElnay.

As an example, he showed that ranitidine's absorption rate was lower in children aged one month to 12 years than adults despite the drug being cleared at the same rate in both.

Pharmacists accused of wasting their talents

Primary care pharmacists are a waste of talent, claims Wally Dove, community pharmacist and member of the Royal Pharmaceutical Society's Council.

"Some of our best pharmacists with clinical skills have been siphoned off to perform what is really a fiscal function. These pharmacists are, in my view, lost to the profession," he said during a BPC debate last week.

"They would have done better to stay working closely with community pharmacies where they really could make a difference to the quality and types of services that are and will be offered to patients, from a community setting," he argued.

On the whole, primary care pharmacists had not facilitated the development of community pharmacy. "Instead they have become part-time accountants, hell bent on reducing the drugs bill for their masters. Their main activity is tinkering with formularies and nagging doctors to rein in their prescribing habits.

"They are, I'm afraid, a side show – a distraction from the real task, which is caring for patients in and from community pharmacies. I fully understand that the environment in the doctors' surgery is perceived to be much more sexy than dodging the Rimmel stand, but it does not

have to be like that.

"Thousands of dedicated community pharmacists are working to improve the impact that community pharmacy can make on patient care. So why don't primary care pharmacists stop wasting their time and start helping to shape the profession in the pharmacy setting?"

Mr Dove's attack came during a debate on *Primary care pharmacists – leading or leaving the profession?*

Opposing him, regional pharmaceutical adviser Joe Asghar said these pharmacists had shown the innovation, enthusiasm, motivation and flexibility to be considered professional leaders. They were becoming recognised as key to information provision

and evidence-based practice, and were changing the way primary care organisations think, plan and deliver.

Although community pharmacists had served the profession well, they had not shown the true qualities of leadership, he claimed. Their vision for the service was not clear and most changes to practice had happened slowly. "The truth is, community pharmacy has changed little in 30 years."

The new contract might give community pharmacists chance to show their worth but "at present, we cannot call them leaders of their profession".

Professor Liz Kay, head of pharmacy services, Leeds Teaching Hospitals NHS Trust,

agreed with Mr Dove that primary care pharmacists behaved as financiers, putting drug costs first rather than obtaining the most effective medicines for patients.

They had become "handmaidens to GPs" and had done little or nothing to reduce medication risks.

On the 'leading' side, Professor Tom Valley, Department of Pharmacology and Therapeutics, University of Liverpool, said hospital pharmacy had seen huge changes. From being pharmacists who "worked in a bunker, handing out tablets through a hole in the wall", they had moved on to the wards and become key members of the multidisciplinary team.

Community pharmacists were "still in the bunker" while primary care pharmacists had become recognised as full team members.

Most of the audience were primary care pharmacists. At the start of the debate 72 per cent thought these pharmacists were 'leading the profession' and 19 per cent thought they were 'leaving the profession'.

Mr Dove and Professor Kay's arguments changed the vote to 66 per cent 'leading' and 21 per cent 'leaving', although 9 per cent "didn't care".



Call for more funding for patient-centred research

Patient-centred scientific research needs to be promoted to the funding bodies that support academic research. At the moment it falls between the

funding councils that support fundamental science on the one hand and applied science on the other, according to Conference science chairman Professor

Graham Buckton.

Those seeking to get patient centred research published in high quality peer-reviewed journals faced similar problems, he said.

As scientists, pharmacists are experts on medicines, and as practitioners they provide services directly or indirectly to patients and other health professionals. Practising pharmacists fill the gap between science and practice.

One of the pressures that prevents pharmacists from exploiting this gap is how science is funded in the UK, said Prof Buckton, from London

University's School of Pharmacy Industry is a poor source of research funding and government money is channelled through a number of research councils.

"We are always at risk of bandwagons or new trends," he said, and warned against throwing away the expertise gained today for the fads of tomorrow.

Much of the work in tabletting technology has moved from pharmacy to chemical engineering labs, he said, adding that: "Pharmacognosy is a subject we were told was dead, but it is very much keeping people alive."



Practising pharmacists fill the gap between science and practice

Prof Graham Buckton

Fine tensions for PEC pharmacists

Pharmacists have an absolutely crucial role on primary care trusts, but there is a fine tension between individual community pharmacists as providers and their more corporate role as PCT members.

This is the view of Dr Mike Dixon, chairman of NHS Alliance, who said that the PEC pharmacist (PCT executive committee pharmacist) represents the greyest, most confusing but finest and most

heroic aspect of the PCT and its aims. On the one hand, pharmacists are there to provide a service for their patients and to do battle with the PCT "enemy" in terms of making their businesses profitable. Then the PEC pharmacist steps out of this role and suddenly becomes responsible for the whole community – making sure that the PCT's limited funds are used effectively and encouraging pharmacists to give advice that might avoid a

medicine altogether.

"This is a supreme challenge," he said. "Will we say that our duty to the individual patient has nothing to do with the PCT's problem of looking after the whole patient or will we rise to the greater challenge of saying that we are all responsible for the health and welfare of the local population?"

Dr Dixon was saddened that some of his GP colleagues wanted to do the minimum possible for the amount awarded for medical services. "If we do that, we've lost the plot, which was about becoming the movers and shakers in the NHS."

He was also disappointed that too many executive committees had become bureaucratised. Rather than being the "engine room" of the PCT, dictating its direction, some PECs had become like the House of Lords rather than the Commons, tamely accepting papers tabled by the management team without being proactive in driving change.

His message to PEC pharmacists was: make sure you keep in contact with all local pharmacists and that they understand your role and the

reasons behind any decisions that you make. "Try to be fair to your peer group and to all those professionals affected by your decisions. Listen, negotiate but be fearless for the public good. Seize the day – for such opportunities to influence the NHS have never been there before."

In the chair, Colette McCready, the National Pharmaceutical Association's director of pharmacy practice, said that half of all PCTs had a pharmacist on their executive committee and there were 165 PEC pharmacists, becoming the most widely represented profession next to doctors and nurses.

Alison Hayes, a community pharmacist who has been appointed to East Devon PEC for a second term, cited the time commitment as one of the biggest challenges. Fortunately her employer, a multiple, receives a locum fee to allow her to attend meetings.

"If it's your own business, don't underestimate the time and costs involved," she warned. She had also had to acquire meeting skills, learn how to prepare bids and gain the ability to step back and look at the wider NHS picture.



Pharmacy practice at the BPC

Pre-reg bottleneck stifles growth

The shortage of pre-registration places for pharmacy graduates could become a rate limiting factor in efforts to increase the number of working pharmacists needed for new service developments.

The chief pharmacists from the home nations acknowledged this was becoming a critical issue at a Q&A session at the BPC on Tuesday.

Professor Peter Noyce, Manchester University, pointed out that while there were 60 to 70 per cent more students at schools of pharmacy than five years ago, there had not been any increase in pre-registration places. "In the next two to three years there will not be enough places. Students will soon get the message that pharmacy is a high risk course – you can get a university place, but not get onto the professional register," he said.

"It could develop into a rate

limiting step in delivering improved pharmacy services," accepted DoH chief pharmacist Dr Jim Smith. "It's not only about pre-reg, but also clinical training places."

Welsh chief pharmaceutical adviser Carwen Wynne Howells

said it was an infrastructure problem. "We have increased pre-reg places and have now reached saturation.

"We have under-estimated the impact of pre-reg, clinical diploma and NVQ placements. We need to look at the capacity we

have to deliver these places."

For Scotland, Bill Scott admitted: "We have failed to address this issue in Scotland so far." He pointed out that for the most part it is private employers that government relies on to provide pre-reg places.



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Famz Farhan MRPharmS continues her series on baby and child development with a look at what constitutes a healthy newborn baby

Welcome to the world



THE COLLEGE OF PHARMACY PRACTICE

This course (module 1282), in association with multiple choice questions being published in C&D October 4, provides one hour's continuing education

A baby who has been cocooned in the womb for nine months, surrounded by protective amniotic fluid and nourished by the placenta, has to contend with the assaults of the outside world and learn to become independent.

First days

In most cases, women are discharged from hospital within 24 hours of giving birth. As well as saving resources for the NHS, the philosophy is that mothers recover better at home. The exception is births by Caesarean section, a major operation that requires seven days' hospitalisation on average. These women are instructed to avoid lifting heavy objects and driving for six weeks to avoid complications.

Health checks

Following the checks immediately after birth, the midwife or doctor also conducts a series of checks within the first 12 hours of a baby's life. These physical examinations and observations include:

- Taking measurements – the baby's weight, length and head circumference are measured to ensure they are within normal ranges. These measurements are repeated at the routine six to eight weeks check-up with the GP.
- The skin – the skin is usually reddish with the extremities slightly blue because of poor initial circulation.
- The head – in a vaginal delivery, the baby's head becomes slightly misshapen as it is squeezed through the birth canal.

This is because the bones of the skull are soft and can overlap to allow delivery. With assisted delivery – with ventous (vacuum suction) or forceps – this can be more prominent.

The shape returns to normal within a few days but the final shape of the head can take several months to form. The head and the face can become bruised during labour, although in breech births the buttocks and feet are affected.

Heart and lungs – the doctor checks the heart and lungs using a stethoscope. The colour of the skin can also indicate heart and lung abnormalities.

Nerves – the doctor checks that the baby's reflexes (*see below*) are working.

Abdomen – the doctor feels the internal organs such as the kidneys, liver and spleen to check their size and position. Enlarged kidneys may indicate urine obstruction.

Hips and limbs – the doctor checks the flexibility of the limbs and hips for signs of dislocation. This is done by rotating the legs within the hip sockets. Dislocated hips are common in newborn babies and they are remedied by bandaging or splinting.

Genitals – in boys the testes have normally descended into the scrotum by birth but may take a few months in others.

Undescended testes could indicate testicular torsion, which requires an operation. In girls, the genitalia are swollen in response to the mother's hormones in the womb.

- To know what checks are carried out on the newborn
- To tell the difference between normal and abnormal conditions
- To be able to reassure parents which unusual signs will pass
- To be aware of reasons for high and low birth weights
- To know the needs and complications for a premature baby



Babies are born with a set of reflexes which include sucking, triggered when an object is placed in the babies' mouth

Continued on page 24 ▶

Surveillance of the newborn

A baby is born with a set of reflexes. The rooting reflex occurs when the side of the baby's mouth is touched. This results in the baby turning its head to that side in search of the nipple. Another reflex essential to feeding is the sucking reflex.

When an object is placed in the baby's mouth, such as the nipple or finger, the baby immediately starts sucking. The moro reflex refers to the action the baby makes when it is startled by a loud and sudden noise. The arms and legs swing forward and the fingers are outstretched.

Disorders and complications

Jaundice

Jaundice in the newborn can occur after the first day, persisting for up to two weeks. Jaundice is also common in breastfed babies; it is usually transient and harmless and is not a reason for stopping breastfeeding.

Jaundice is a symptom of hyperbilirubinaemia, which occurs as a result of high levels of bilirubin circulating in the blood. Normally old red blood cells are removed from circulation by the spleen and broken down into the yellow pigment bilirubin. This pigment is taken to the liver where it is conjugated and excreted into the intestine as a component of bile.

In the newborn, however, the levels of bilirubin increase temporarily, either because of



Mothers may need to be reassured about normal and abnormal conditions

overproduction or under-excretion, causing jaundice and making the skin appear yellow. The stools also take on a yellow tinge as babies lack the gut bacteria that break down bilirubin. The baby also has an intestinal enzyme that can alter the bilirubin and enable it to be

reabsorbed back into the blood, further adding to the jaundice.

The midwife keeps an eye on jaundice and, if it is prolonged, will refer the mother and baby to the doctor, especially if the baby's stools are pale or the urine is dark in colour. Very high levels of bilirubin can accumulate in the brain and can lead to brain damage (kernicterus).

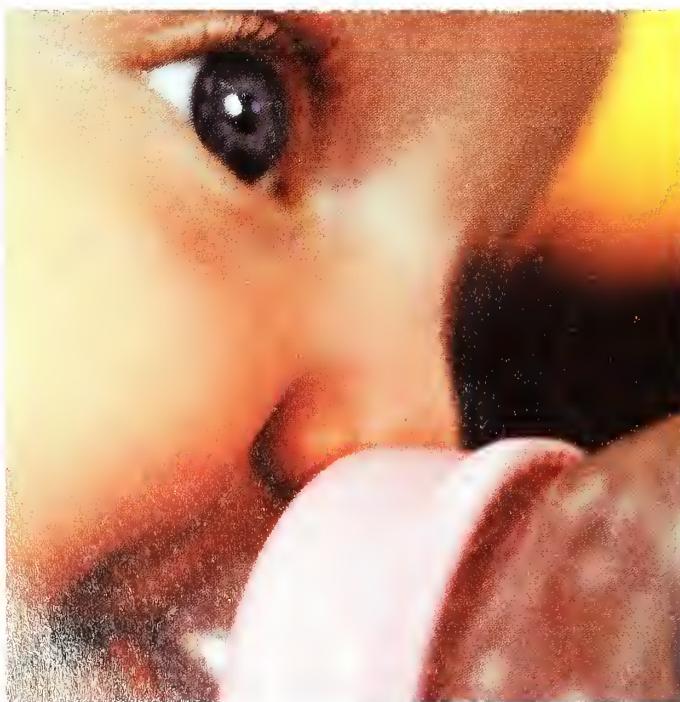
Mild hyperbilirubinaemia does not need treatment. Mothers are recommended to feed the newborn frequently to increase gut motion and reduce the re-absorption of bilirubin. Phototherapy may be recommended as light can alter the chemical structure of

bilirubin, thereby accelerating excretion by the liver. More severe cases may warrant a blood transfusion.

Haemorrhagic disease

Babies are born with low levels of vitamin K and this puts them at risk of clotting abnormalities and a rare condition called haemorrhagic disease of the newborn (or vitamin K deficiency bleeding). In the UK, babies are routinely offered vitamin K injections within the first few days as a precaution to prevent bleeding.

Controversy has surrounded its use as one study has suggested



There may be reasons for babies having an abnormal birthweight

Small and high birth weight

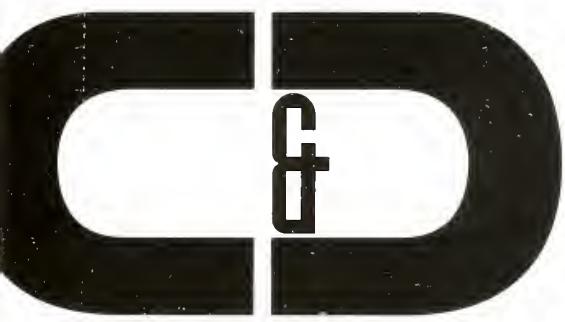
Babies on average weigh 7lb (about 3kg) at birth. However, there are possible reasons for babies having a smaller or larger birth weight than normal:

Small birth weight

- Mother smoked during pregnancy
- Mother abused alcohol or drugs
- Mother had inadequate diet
- Baby had an infection
- Baby has a chromosomal abnormality

Large birth weight

- Mother has diabetes
- Mother is overweight
- Baby suffers a heart abnormality
- Inherited tendency to large weight



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Number 17: *Felodipine*

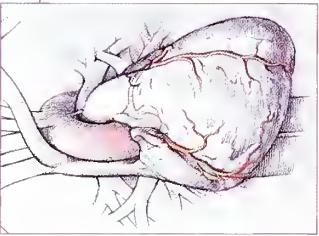
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Felodipine is an interesting dihydropyridine calcium channel blocker. This molecule has seen an increase in prescribing due to its cost-effectiveness and emerging clinical data. Also, of the 9-dihydropyridine calcium channel blockers available, it is one of the few agents that can be used for both hypertension and angina.



Hyper-tension felodipine 5-20mg daily

Hypertension felodipine 5-10mg daily

Angina felodipine 10mg daily

Once daily The once daily dosing of felodipine aids compliance and ease of prescribing.

Indication The usual starting dose for both hypertension and angina is 5mg (2.5mg in elderly). In hypertension the usual maintenance dose is 5mg-10mg daily. Occasionally up to 20mg will be used. For angina, the usual maximum dose is 10mg once daily.

Caution in heart failure The main one to watch out for is uncontrolled heart failure. These patients can suffer left ventricular dysfunction with this agent (of note, controlled heart failure is not perceived as a problem). For the same reason felodipine should not be initiated within one month of a myocardial infarction.

Contraindications Felodipine's side-effect profile is unremarkable when compared with other calcium channel blockers - flushing, headache, dizziness, fatigue, ankle oedema and rash.



Grapefruit (and grapefruit juice) interacts with felodipine and a number of other calcium channel blockers. This is due to inhibition of the cytochrome P450 enzyme system (1A2). As a result, the reduced hepatic metabolism leads to raised drug levels and potential toxicity. Patients should avoid grapefruit and grapefruit juice while taking this medication.

FORMULARY FACTS



Blood pressure intervention levels

Based on guidelines from three different visits



The management of hypertension is undergoing a revolution with new guidelines and new targets set by the

National Institute

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Maybe more

importantly, the

new GP contract

now has BP

targets which

directly links the

income of GPs to

the effectiveness

of therapies and

compliance of

their patients!

140-160/
90-99mmHg

Less than
140/90mmHg

Above
160/100mmHg

Calculate
CV risk

Advise

Treat BP until cardiovascular targets levels

Patients should be treated if they fall into one of the three risk criteria below:

If 10 year CV risk 20%

If 10 year CHD risk 15%

If evidence of end organ damage, ie heart failure, stroke, microalbuminuria, retinopathy, angina, etc

(The risk of coronary heart disease in men and women can be estimated using the risk prediction charts at the back of the BNF)

Action plan

1. When a mother takes home her new baby she will be concerned about anything she observes that is not within her experience. In your practice workbook list the common anatomical, physical and physiological problems she may encounter. Then list those signs that are "usual", together with a few notes about advice you could give. Also note signs that require referral.

2. Revisit the birth weight box. Can you add to these factors influencing birth weight? Devise a list of points you would make to pregnant women, which would help reduce these problems.

3. Using reference sources, check if there are more factors that lead to premature birth than those listed in the article.

4. Try to find out when doctors intervene in delayed onset of birth (not extended labour). Do you know what factors may result in such a delay?

5. Find out from a health visitor the measurements for under and over-sized babies and what the health implications are.

link with childhood cancer but more recent research has disproved this.

Guthrie test
The Guthrie test, also called the "heel prick" test, is used routinely to test for the inherited conditions phenylketonuria, hypothyroidism, sickle cell disease and thalassaemia. A small blood sample is taken from the baby's heel at six to seven days.

Skin rash

Newborns develop a mild skin rash in the first few weeks of life, particularly in areas that are rubbed by clothes, such as the arms, legs and back. The rash disappears by itself and application of lotions should be avoided as it may worsen the condition.

Soft tissue swelling

Pressure during delivery and use of forceps can damage some of the fat tissue overlaying bone. This forms hard lumps commonly found on the head, cheeks and neck. The lumps may break through the skin and ooze out as a yellow liquid. The lumps heal quickly and disappear, so need no treatment.

Meconium aspiration syndrome

Meconium - a sticky, green/black stool - appears in the baby's first bowel movement. All babies pass meconium within 24 hours of birth. If not, the meconium may have formed a hardened plug that needs removal by a gentle enema. Alternatively, there may be a bowel blockage.

Meconium aspiration syndrome occurs in response to distress, when the foetus passes the meconium into the amniotic fluid and then forcefully breathes it in. This can block the airways and eventually lead to lung collapse or rupture.

The syndrome is more common and severe in post-mature babies (over 42 weeks), as less amniotic fluid surrounds them.

Premature babies

A premature baby refers to an underdeveloped baby who is born at less than 37 weeks gestation. The reasons for prematurity are unknown, although contributory factors include inadequate prenatal care, poor nutrition, untreated illness or infection during pregnancy.

Care of the premature baby requires the following considerations:

Lungs

The main problem with premature lungs is that they do not produce enough surfactant to keep the alveoli open and filled with air at birth. As a result the baby's alveoli do not stay open and the lungs collapse between each breath, resulting in respiratory distress syndrome. These babies will require oxygen and in some cases may also need a ventilator and local administration of a surfactant drug.

Brain

The breathing centre in the brain may not be developed sufficiently at the time of birth so apnoea can occur, marked by pauses in breathing. This mechanism will develop as the baby grows. The sucking and rooting reflexes may not have had a chance to develop

in premature infants.

As a result, these babies may need to be fed intravenously, progressing to milk feeds through a gastric tube. At 34 weeks, they can be breastfed or bottle fed as normal. Blood glucose levels can swing dramatically in premature infants so close monitoring is needed.

Immune system

Babies born prematurely will not have had the full benefits of the mother's antibodies passed to them across the placenta and are therefore more susceptible to infections, particularly sepsis.

Excretion

The baby's intestine and kidneys need to take over the excretory functions from the placenta once born. The kidneys may not be fully functioning if the baby is very premature. The intestine and kidneys are necessary for the excretion of bilirubin (*see above*) as excessive amounts can lead to jaundice and even brain damage.

Body temperature

Premature babies lose heat easily and have problems maintaining their body temperature. An incubator helps overcome these problems.

Fawz Farhan is a visiting lecturer in pharmacy, King's College London.



A premature baby is defined as one which is born at under 37 weeks

Online learning for pharmacists

Pharmacists using **Pharmacy Update** for continuing education are reminded of the need to test. With support of Genus Pharmaceuticals, C&D's readers can check their progress by using the multiple choice question (MCQ) paper to be inserted in the October 4 issue, which will cover this week's CPP-accredited module together with that in the September 27 issue. These will cover

● Skin infections part 2 (1281) ● The newborn baby (1282)

A telephone marking service offers independent verification of results - details on the monthly MCQ papers. People wanting to register for Pharmacy Update can contact Mary Prebble on 01732 377269.

CD
in association with



GENUS PHARMACEUTICALS

Corticosteroid misuse risks asthmatics' sight

Failure to step down the dose of inhaled corticosteroid treatments is putting the eye health of asthmatics at risk, says the National Asthma Campaign.

Responding to recent research, Professor Martyn Partridge, chief medical advisor to the NAC, said: "This is the second study that has shown that inhaled steroid usage may be associated with a slight increased risk of cataracts. It is very much a risk versus benefit argument, but what should be clearly understood is that the risk is negligible and the benefit is great if everybody is treated according to the guidelines, with the lowest dose of inhaled steroid that controls their condition."

Professor Partridge's main criticism was over asthma care: "Unfortunately there is evidence



that the stepping down of inhaled steroids when asthma is controlled in a guided fashion does not always take place and those with asthma remain on unnecessarily high doses. We should be able to control asthma with much smaller

doses of inhaled steroids by combining the steroid with a long-acting inhaled bronchodilator such as formoterol or salmeterol."

The research, published in the *British Journal of Ophthalmology*, showed that long-term use of high-dose corticosteroids increased the patient's risk of developing cataracts. The authors say there is evidence to show a dose-response relationship where the risk increased relative to the dose and duration of the treatment. They conclude, in line with Professor Partridge, that low doses, while not totally risk-free, should be used wherever possible because of their reduced risk of adverse effects.

For more information:

www.bjophthalmol.com

Br J Ophthalmol 2003; 87: 1247-51.

NiQuitin CQ 4 mg Mint Lozenge Product

Information. **Presentation:** White Lozenge containing 4 mg nicotine. **Indication:** Relief of nicotine withdrawal symptoms, including cravings, associated with smoking cessation. Use with behavioural support programme.

Dosage: **Adults only:** 4 mg lozenge if time to first cigarette \leq 30 minutes of waking. Stop smoking completely. Weeks 1 to 6; 1 lozenge every 1 to 2 hours (min. 9 max. 15/day), weeks 7 to 9; 1 lozenge every 2 to 4 hours, weeks 10 to 12; 1 lozenge every 4 to 8 hours. Weeks 13-24, use 1 to 2 lozenges per day only when strongly tempted to smoke.

Contraindications: non-smokers, children and adolescents under 18, phenylketonuria, recent heart attack or stroke, severe irregular heartbeat, unstable or worsening angina, resting angina. Hypersensitivity to nicotine or other ingredients. **Precautions:** hypertension, peptic ulcer, severe kidney or liver impairment, phaeochromocytoma, hyperthyroidism, diabetes, cardiovascular disease (e.g. heart failure, stable angina, cerebrovascular disease, vasospastic diseases, occlusive peripheral arterial disease). Active oesophagitis, oral or pharyngeal inflammation, gastritis or peptic ulcer may experience symptom exacerbation.

Interactions: Concomitant medication may need dose adjustment; caffeine, theophylline, imipramine, pentazocine, phenacetin, phenylbutazone, insulin, tacrine, clomipramine, olanzapine, fluvoxamine, flecainide and adrenergic blockers (e.g. propranolol) may need dose decrease; adrenergic agonists (e.g. salbutamol) may need dose increase. Propoxyphene, frusemide and H₂-antagonists may also require dosage adjustment as smoking may alter their effects. **Side effects:** Headache, dizziness, mood swings, irritability, anxiety, insomnia, nausea, vomiting, dyspepsia, hiccup, flatulence, diarrhoea, constipation, appetite changes, mouth irritation/ulceration, pharyngitis, coughing, wakefulness. Uncommon adverse events include general malaise, skin rashes, itching, sweating, gingival or nose bleed, palpitations, tachycardia, chest pain, flushing, nasal or throat irritation, chest infection, dyspnoea, asthma exacerbation, taste disturbance, halitosis, gagging, lip soreness or ulceration, tooth or jaw ache, oesophageal reflux, peptic ulcer, abdominal cramps, excessive thirst, nocturia, lightheadedness, nightmares, restlessness, migraine, sensory disturbance.

Pregnancy/lactation: not recommended. **Legal category:** GSL. **Product licence number:** PL 00079/0374. **Product licence holder:** GlaxoSmithKline Consumer Healthcare, Brentford, TW8 9GS, U.K. **Pack size and RSP:** 36 lozenges £8.99, 72 lozenges £17.49. **Date of last revision:** August 2003. **NiQuitin CQ and Committed Quitters** are registered trade marks of the GlaxoSmithKline group of companies.

Warfarin and cranberry danger

Patients taking warfarin are advised to limit or avoid drinking cranberry juice in light of reports of possible interactions in the recent issue of *Current Problems in Pharmacovigilance*.

The Committee on Safety of Medicines recommends that patients taking warfarin should be advised not to consume cranberry juice.

The CSM received five reports since 1999 that suggest a link between cranberry juice and warfarin and adverse events.

One case involved a patient whose INR (international normalised ratio) increased to greater than 50, and who later died after gastrointestinal and pericardial haemorrhage.

The CSM reports that the effect on INR is likely to be

because of the interaction of cranberry's constituents and warfarin with cytochrome P450 and its isoforms.

Further investigation is needed, claims the CSM, into whether the problems stems from an interaction with cytochrome P450 and its isoforms, or in another way.

For more information:

www.mhra.gov.uk

Diabetes risk

As many as one in 10 apparently healthy adults of South Asian origin living in Britain are likely to have Type II diabetes, a study presented at the BPC has revealed.

Researchers from the University of Bradford randomly screened for early identification diabetes adults visiting local community pharmacies. They found that, compared to white Europeans and Afro-Caribbeans, those of South Asian origin were considered most at risk of having Type II diabetes.

Bradford University lecturer Mahendra Patel, commented: "Pharmacists can be very effective identifying diabetes among apparently healthy individuals at an early stage. It's unlikely people will actively request a diagnostic test when they're feeling well."

Alternative medicine threat

One in 20 people are putting themselves at risk by taking dangerous combinations of complementary and alternative medicines (CAM) alongside prescription and OTC medicines, according to research presented at the British Pharmaceutical Conference.

The majority (62 per cent) of people questioned were taking at least one CAM, and 41 per cent failed to mention this to the pharmacist because they did not recognise CAMs as medicines.

Swati Patel, the pharmacist who carried out the study, said: "Health professionals need to be aware of CAMs taken by patients and be able to advise them on the possible side effects." Ms Patel also gives some practical advice to

pharmacists: "It's also important for professionals to understand the health trends of their local population. This study identified, for example, that people of Asian origin took the largest amount of CAMs (32 per cent), many of which were Ayurvedic medicines. A health professional based in an area with a high Asian mix should be ready to ask the appropriate questions when people come in with a prescription".

The most common combination (30 per cent) in the study was St John's wort and selective serotonin reuptake inhibitors.

Other combinations with potentially dangerous interactions are ginkgo and aspirin, St John's wort and the contraceptive pill, and ginseng and warfarin.

"PACKET IN O"

New NiQuitin CQ® 4mg Mint Lozenge

The unsurpassed efficacy of original NiQuitin CQ® Lozenge, in a fresh new flavour.

For those who smoke within 30 minutes of waking, this power, combined with your support, could be just what they need to quit.



Nicotine

Help bring smoking to a full stop

Easy-to-swallow Gavilast relief

Reckitt Benckiser is extending the Gaviscon range with fast-acting tablets formulated to deliver lasting relief from the symptoms of heartburn and indigestion for up to 12 hours.

Gavilast are small and easy-to-swallow tablets containing ranitidine 75mg. The product is available in a P pack of 24 and two GSL packs of 6 and 12 tablets.

Dosage for adults and children aged 16 and over is one tablet taken whole with a drink of water as soon as symptoms occur. If symptoms persist for more than one hour, one more tablet may be administered. There is a maximum dosage of four tablets in a

period of 24 hours. The launch will be supported by a multi-media advertising campaign running for the rest of 2003 and into 2004.

Price: 24s £7.19, 12s £3.99, 6s £2.15

Pip code: 24s 297-8229, 12s 297-8211, 6s 297-8203

Reckitt Benckiser plc
Tel: 01482 326151



Rescue Remedy Spray will give your business a more positive outlook.

We can't stress that enough



The convenience of Rescue Remedy in pump-action spray, also in dropper and cream formats makes it even easier for your customers to cope with life's ups and downs.

To help you cope with the up in demand for Bach's best seller, stock up now by calling the dispensing and OTC freephone orderline on 0800 289515.



Nelsonbach, Broadheath House, 83 Parkside, Wimbledon, London SW19 5LP.
To find out more about us, visit www.bachremedies.com 20ml RSP £6.49 (incl. VAT). Trade Price £3.42 POR 38%.

Making a display of pocket sized specs

Direct Perception is introducing a new Pocket Specs and Mini Specs Combi pack into the Superspecs range of reading glasses.

The pack comprises 12 each of Pocket Specs and Mini Specs (rsp £7.99 each). A compact mint acrylic display stand includes instructions for customer guidance.

The Combi package costs



£87.60 plus VAT (trade price) and individual model packages are also available.

For more information:
Direct Perception Ltd.
Tel: 020 8551 1315

Radian B warms to roll on pain relief

Ransom Consumer Healthcare is introducing a roll-on heat treatment for aches and pains into the Radian B range.

Radian B Red Oil is a rubefacient for the relief of muscle pain, lumbago and rheumatic pain. It is formulated to work by increasing blood flow in the vessels in and around the affected area and will slightly redden the skin. It contains natural ingredients including mustard oil, oil of cloves and arachis oil. The roll-on applicator is designed to be easy to use.

Price: £3.99

Pack Size: 25ml

Pip code: 296-5846

Chemist Brokers Healthcare

Tel: 023 9222 2500



Cool customers' eye opener

Aventis Pharma is expanding the Brolene Eye Drops brand with cooling eye drops to soothe dry, tired eyes. Brolene Cool Eyes contains hyromellose 0.3 per



cent. One or two drops will provide instant moisturising relief for tiredness and discomfort caused by air conditioning, long periods in front of computer and TV screens, pollutants, smoky rooms and late nights. It is suitable for adults and children aged over 12.

The launch will be supported by a £500,000 advertising campaign.

Product dispensers, point-of-sale material and consumer leaflet are available.

Price: £3.99

Pack Size: 10ml

Pip code: 297-6876

Chemist Brokers Healthcare

Tel: 023 9222 2500

Now Tixy gets tough on colds and flu



New Tixyplus offers everything mums need to take on the symptoms of colds and flu.

- Specially made for children and has a great tasting vanilla and raspberry flavour.
- Dual action of paracetamol and an antihistamine.
- Backed by a targeted parenting ad campaign to send mothers to your pharmacy.

Paracetamol and Diphenhydramine

New Tixyplus Active Relief for Colds & Flu,
tough on symptoms – and a plus to your profits

Now Mums kiss it better with

Tixyplus®

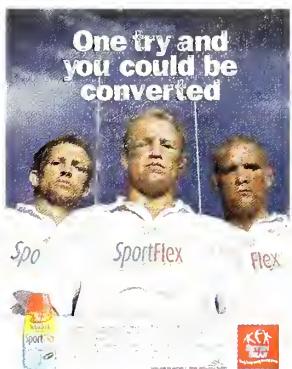
Presentation: Oral suspension containing 7 mg Diphenhydramine Hydrochloride and 120 mg Paracetamol in 5 ml. Indications: Mild to moderate pain including headache, aches and pains and sore throat, reduction of temperature, reduction of nasal irritation and nasal discharge. Symptomatic relief of colds, influenza, and feverishness. Particularly suitable where symptoms result in disturbances of sleep. Dosage and administration: 2 to 5 years – 5 to 10 ml three to four times a day, 6 to 12 years – 10 to 20 ml three times daily. Do not use for more than 3 days without consulting a doctor. Children under 2, adults and children over 12 – Not recommended. Contraindications: Hypersensitivity to any of the ingredients. Acute asthmatic attacks. Precautions: Severe hepatic or renal dysfunction, cardiovascular disease, porphyria, glaucoma and epilepsy. Avoid concomitant paracetamol or antihistamines. Side effects: Drowsiness, dry mouth, dizziness, fatigue, upset stomach, palpitations, hypersensitivity such as skin rash, few reports of blood dyscrasias. Interactions: Tricyclic antidepressants, hypnotics, anxiolytics, metoclopramide, domperidone, chlorpromazine. Legal category P Recommended retail price: £3.49 (100 ml) PL No.: PL 0030/0091 PL Holder: Novartis Consumer Health, Wimblehurst Road, Horsham, West Sussex RH12 5AB Date of preparation: August 2003

SportFlex up 'n' down under

The first appearance of the Seven Seas SportFlex rugby sponsorship campaign will break next month at the start of the Rugby World Cup in Australia.

Two adverts will appear featuring three of England's Grand Slam-winning rugby squad in black and white and the SportFlex tub in full colour.

The straplines read "The art of staying ahead is to remain flexible"



For more information:

Seven Seas Health Care Ltd
Tel: 01482 375234

and "One try and you could be converted".

The first burst of the £250,000 campaign will run in the national daily newspapers and health and lifestyle magazines during the 48 match World Cup which climaxes with the World Cup final in Sydney on November 22.

SPC changes

Sanofi-Synthelabo has announced changes to the SPCs for Danol (danazol) and Motilium (domperidone).

Danazol (10ml film coated tablets, 1mg/ml suspension and 30mg suppositories) is now licensed for use as second line therapy for endometriosis, and benign breast cancer only. It is no longer indicated for gynaecomastia, pre-operative thinning of the endometrium, dysfunctional uterine bleeding, and control of benign, multiple or recurrent breast cysts in conjunction with aspiration. These indications have been removed from the SPC.

The SPC for domperidone is extended to include relief of symptoms of nausea and vomiting, epigastric sense of fullness, upper abdominal discomfort and regurgitation of gastric content in adults. In children, the SPC now includes the relief of symptoms of nausea and vomiting.

In addition, the following contraindications have been added: prolactin-releasing pituitary tumour, known hypersensitivity to domperidone or any of the excipients, and domperidone should not be used where stimulation of gastric motility may be harmful.

For more information:

www.medicines.org.uk
Sanofi-Synthelabo
Tel: 01483 505515



by the brand's 'Voice' commercial.

For more information:

GlaxoSmithKline Consumer Healthcare
Tel: 020 8047 2700

Discontinuations from GSK

GlaxoSmithKline is announcing that it expects stocks of certain discontinued medicines will be exhausted during September and October.

GSK expects that stocks of Ervevax, (single rubella vaccine) will be exhausted by the end of September.

GSK advises pharmacists that stocks in its distribution centres of Allen & Hanburys' Rotahaler device, Rotacap and Ventide medications are expected to run out during October. The company anticipates stocks of Ventide inhaler to exhaust in September.

The company advises pharmacists to sell all remaining stock until it is exhausted.

For more information:

GlaxoSmithKline
Customer Contact Centre (Ervevax)
0808 1009991
Customer Contact Centre (Allen & Hanburys) 0800 221441

Asacol name change

Asacol 400mg is now Asacol 400mg MR, but the product and reimbursement remains the same.

The Prescription Pricing Authority advises that prescriptions with either brand name will be reimbursed on the basis of Asacol 400mg MR tablets. Generic prescriptions for mesalazine tablets 400mg e/c or mesalazine tablets 400mg m/r will be reimbursed in line with the Drug Tariff Part VIII entry for mesalazine tablets 400mg (e/c).

For more information:

Procter & Gamble Pharma
Tel: 01784 474900

Citalopram launch



Niche Generics launched citalopram tablets (10, 20 and 40mg) this week.

Niche Generics says that it is the only company in Europe with permission from the patent holders Lundbeck to launch a competing product.

Niche Generics' product has been shown to be essentially similar to Lundbeck's Cipramil.

For more information:

Niche Generics
Tel: 01462 633800
Pip codes: 10mg 110-9760, 20mg 110-9776, 40mg 110-9784

Sugar-free methadone launched

Thornton & Ross has launched Methadone 1mg/ml Oral Solution Sugar Free.

Pharmacy requests prompted Thornton & Ross to bring out a sugar free version in their methadone range.

Available as a 500ml bottle, the sugar free version is the same price as Thornton & Ross' standard Methadone Mixture 1mg/ml.

Price: £6.00

Thornton & Ross
Tel: 01484 848239 (Julie Topping) and 01484 848263 (Robert Powell)

TVnextweek

Bassett's Soft & Chewy Vitamins: GMTV, Sat

Just for Men: GTV, STV, B, G, Y, TT, C4, C5

Lloydspharmacy's Diabetes Testing Service: GTV, STV, B

Lucozade Hydro: All areas except U, CTV, GMTV

Rimmel London 'Extreme Definition Mascara': All areas except U, CTV, GMTV

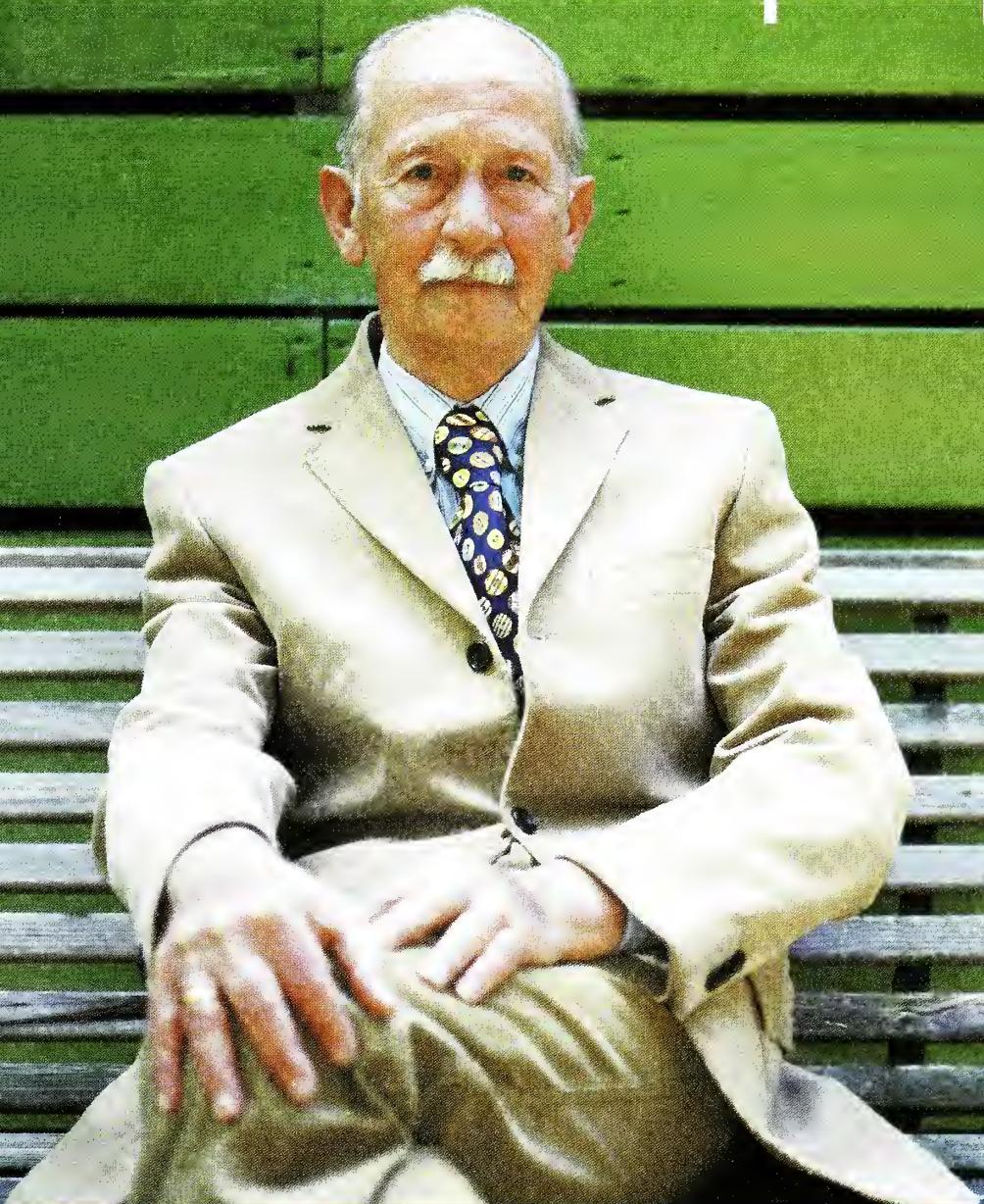
Seven Seas Neutra Taste: C5, GMTV

Seven Seas Pure Cod Liver Oil: C4, C5, GMTV, Sat

PharmaSite for next week: Eumobase - window, Eumovate - in-store, Ex-Lax - dispensary

A-Anglia, B-Border, C-Central, C4-Channel 4, C5-Channel 5, CAR-Carlon, CTV-Channel Islands, G-Granada, GMTV-Breakfast Television, GTV-Grampian, HTV-Wales & West, LWT-London Weekend, M-Meridian, Sat-Satellite, STV-Scotland (central), CT-Tyne Tees, U-Ulster, W-Westcountry, Y-Yorkshire

Sandoz we focus on people



September 2003

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SANDOZ

Think Generics

Whether mums are confused about when to start weaning or worried about an infant food allergy, pharmacies can maximise on baby feeding sales by providing a value-added service. Sarah Thackray reports

Baby talk

For the best start in life, exclusive breastfeeding is now recommended for the first six months (26 weeks) after birth before the introduction of weaning foods - with continued breastfeeding thereafter.

That is the latest recommendation from the Department of Health which was issued at the start of National Breastfeeding Awareness Week last May.

Official advice prior to this announcement had been to recommend weaning between four to six months to support infant nutrition.

As a result of the new recommendation, mothers may be confused by inconsistent weaning messages between the government, health professionals and the baby food companies.

A Heinz spokesperson comments: "unfortunately this new recommendation was made without prior warning or consultation with all interested parties."

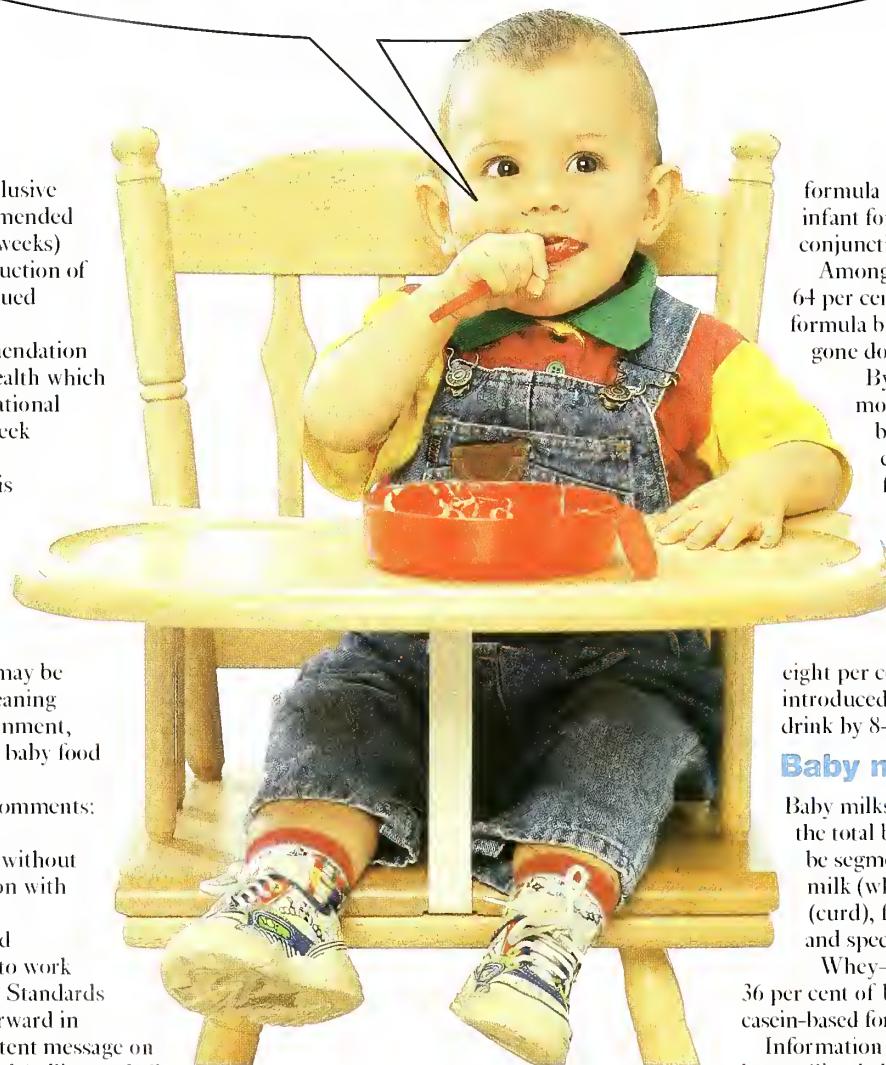
Heinz and other baby food companies are now looking to work with the DoH and the Food Standards Agency on "the best way forward in providing a clear and consistent message on baby feeding with respect to labelling and all information materials".

Breastfeeding rates

Despite all the encouragement and information provided to mums-to-be about breastfeeding, it's estimated that around 30 per cent of mothers do not breastfeed and give their baby infant formula as the sole source of nutrition from birth.

A recent DoH survey showed that initial breast-feeding rates vary around the UK - from 71 per cent in England and Wales, to 63 per cent in Scotland and 54 per cent in Northern Ireland.

By 1-10 weeks, almost 58 per cent of mothers had switched entirely to infant



Mother's may be confused by inconsistent weaning messages

formula and 75 per cent were using infant formula either entirely or in conjunction with breastmilk.

Among bottle-feeding mothers, 64 per cent gave a whey-based formula but by 8-9 months this had gone down to 20 per cent.

By 8-9 months, 30 per cent of mothers were using a casein-based formula and 37 per cent were feeding follow-on formula.

And even though the DoH recommends that cow's milk should not be given as a main milk drink for the first year of life, the survey showed that eight per cent of mums have introduced cow's milk as the main milk drink by 8-9 months.

Baby milk sales

Baby milks account for 45 per cent of the total baby feeding market and can be segmented into five sectors - first milk (whey-based), second milk (curd), follow-on milk, soya formula and special feeds.

Whey-based formula accounts for 36 per cent of baby milk value sales, whilst casein-based formula has a 26 per cent share.

Information Resources report that the best-selling baby milk in pharmacy is SMA Gold (1st milk) followed by SMA White (2nd milk), SMA Progress (follow-on), Cow & Gate Premium (1st milk) and Cow & Gate Plus (2nd milk).

Brand loyalty is extremely high in the milks segment and research shows that mums will shop elsewhere if their preferred brand is unavailable.

Ready-to-feed milks are the fastest growing format - up by 9.7 per cent in value. Within this sector, single serve has 62 per cent of value and is showing the strongest growth at 12 per cent (Information Resources 52 w/e May 2003).

Continued on page 34

CETRABEN® Emollient
Cream. ABBREVIATED
PRODUCT INFORMATION.
Presentation: A thick white
cream with the characteristic
odour of paraffin oil, each
containing: white soft paraffin
13.2% w/w; light liquid
paraffin 10.5% w/w.

Indications: Cetraben
Emollient Cream is an
emollient, moisturising and
protective cream for the
symptomatic relief of red,
inflamed, damaged, dry or
chapped skin, especially
when associated with
endogenous or exogenous
eczema.

Dosage: Cetraben Emollient
Cream should be applied to
the dry skin areas as often as
required and rubbed in.

Contra-indications:

Hypersensitivity to any of the
ingredients.

**Special warnings and
precautions:** None known.

Pregnancy and Lactation:
No special precautions are
required.

Side Effects: Very rarely, mild
allergic skin reactions
including rash and erythema
have been observed, in which
case the product should be
discontinued.

**Marketing Authorisation
holder:** Pharma Health Care
Ltd, 186 South Ealing Road,
London, W5 4RJ.

**Marketing Authorisation
number:** Cetraben® Emollient
Cream (PL 17320/0001).

Basic NHS Price: £1.17 per
50g tube, £2.38 per 125g tub,
£5.61 per 500g pump
dispenser.

Legal category: GSL.

Further information from:
Medical Information, Sankyo
Pharma UK Limited, Repton
Place, White Lion Road, Little
Chalfont, Amersham, Bucks.
HP7 9LP.

CETRABEN® is a registered
trademark.

Date of preparation, API:
September 2001

Date of revision,
API: April 2002.

Date of preparation:

August 2003.

CTF0309T

Cetraben® dry skin formula



White soft paraffin, light liquid paraffin

Specially formulated to relieve dry skin

Around 5 per cent of babies have cows milk intolerance and therefore require a special feed if they are not breastfed. Most of these babies receive a soya formula on prescription and some have an extensively hydrolysed formula (also on prescription), especially if their symptoms are gastrointestinal in nature. Eighty per cent of soya formula used in the UK is given on prescription with 20 per cent being purchased by mums – usually from the pharmacy.

Lactose intolerance is also seen relatively frequently. This may occur after a bout of gastroenteritis, when the lactose enzyme levels in the gut become reduced resulting in a transient lactose-intolerance lasting four to eight weeks.

This is identified in a baby who returns to normal feeds after the infection and is otherwise well but who has loose watery stools. The demand for lactose free feeds has increased by 14 per cent over the last year whilst the anti-regurgitation market has grown by 42 per cent.

Frequent regurgitation of feeds is another common difficulty which affects up to 50 per cent of babies, according to Janet Stelling, SMA special feeds product manager. This has a physiological background as babies' digestive systems are immature at birth and gastro-oesophageal reflux is very common. However, when it happens frequently it can be very distressing for both mum and baby. This is a temporary problem with most babies growing out of it within a few months.

She comments: "SMA Staydown for babies who bring backs their feeds and SMA LF (lactose free) are only available in pharmacy so the growth of these products has purely impacted on pharmacies and continues to give pharmacies an important role in advising parents on infant feeding."

Organic growth

Sales in the baby feeding market are split between baby milks – 45.8 per cent, wet food – 33.5 per cent, dry food – 10.4 per cent, finger foods – 5.1 per cent, and drinks – 5.2 per cent (*Information Resources May 18, 2003*).

The organic sector of the baby food market has steadily increased. FSA research (Jan/Feb 2003) shows that over 44 per cent of mums prefer to feed their babies a diet that is certain to be free from chemical residues such as pesticides and fertilisers.

The value of the overall baby feeding market has been declining since 2000 and the multiple grocers have lured 75 per cent of baby food sales into their trollies as mums add baby food to their weekly supermarket shopping list. Sales of baby foods, drinks and milks are all down in pharmacy compared to a year ago. According to Information Resources, pharmacy sales of wet and dry foods have been particularly hard hit with a decline of 19 per cent and 15 per cent respectively over the last year. Baby drinks also saw a drop of 16 per cent. Even sales of baby milks were down by nine per cent in pharmacies.

Finger foods fared comparatively better in pharmacies, although even these have suffered a decline of three per cent.

Merchandising advice

Heinz has the following merchandising tips for maximising on baby feeding sales in pharmacies:

- Clearly define each segment within the fixture for ease of navigation
- Milks should be merchandised first in the customer flow and should represent around 25 per cent of the baby feeding fixture
- Dry foods (particularly baby rice) are typically used as a first weaning food and should be merchandised after the milks segment as next in the customer flow
- Wet baby food is the largest segment by volume and should be given 40-45 per cent of the total baby food space

- Wet baby food should be merchandised by brand and then by age of baby with predominance of the four months old products
- Dry foods should be given around 12 per cent of the space allocated to baby food and located above wet baby food
- Juices should be allocated around 10 per cent of the space and should be merchandised at eye level as they are often an impulse purchase
- Finger foods should also be merchandised at eye level to maximise impulse sales and are especially important to display in pharmacies

Putting baby in the picture

Many passport photo operators have seen an increase in demand for baby passport pictures since the UK Passport Office advised that all children from newborn babies up to the age of 15 must have their own passport. Each application must be accompanied by two photographs of the baby or child.

Demand is set to increase further from October 1 after which the USA will refuse entry to any child who is not travelling with their own personal documentation.

Independent research commissioned by Polaroid revealed that the market for passport-type photographs within the UK is around 20 million p.a. The total market is expected to grow by three to five per cent this year.

Paul Coombes, Studio Polaroid marketing manager for Polaroid UK, says, "the Polaroid passport service is especially suited to pharmacies because of their location and community-based nature.

"Typically, a pharmacist can earn 66 per cent margin on a set of four passport photos selling at around £3.49."

He also points out that many pharmacists find that a passport service helps increase footfall and boost overall business.

Tips for photographing babies

● Ask the parent to place their baby onto a white background spread on the floor away from any obstructions and thoroughfares. Polaroid has just introduced a white bean bag especially for the purpose called the Baby Beanie



- Ensure the baby's head is fully supported
- Ask the parent to remain just by the side of the baby whilst the photograph is being taken in case the baby rolls
- Never leave the baby unattended
- The camera should be approximately 0.7m from the baby so that the head size in the viewfinder appears the same size as an adult's face when taken normally
- Darken the camera down to its darkest setting
- Rotate the flash upwards slightly
- Frame the baby in the viewfinder so that the right hand side of the baby's face and the baby's eyes are at a level one-third of the way up the frame
- Use a rattle to attract the baby's attention

Continued on page 36 ►

The Tommee Tippee touches mean the Midas touch for pharmacy!



One brand One voice One major success story...

That's Tommee Tippee following Jackel International's decision to adopt a single brand strategy. And it's certainly paying off for the independent pharmacy sector where Tommee Tippee has become stronger than ever before.

The brand may be 40 years old but a constant stream of new and innovative products within the last few months, coupled with a number of exciting trade offers for the pharmacy have meant soaring sales throughout the summer:

It's less than six months since Tommee Tippee launched a completely new range for newborns featuring soothers, bottles and a completely new teat.

Called the Comfort Nuby teat – because it has little nubs all over it to soothe and massage a baby's gums while feeding – it has had a very enthusiastic welcome from mums and has won two Best Buy awards in the parenting press.

Meanwhile, new designs, new packaging and the introduction of silicone soothers have had a noticeable impact on soother sales through pharmacy.

And newly-introduced electric and microwave sterilisers, building on the previous success of the free-product-in-pack Maws sterilisers have also been well received.

The Tommee Tippee Electric Steriliser, with

a rsp of £45, includes £18 worth of products – three wide neck bottles, Comfort Nuby teats, bottle brush, teat tongs and Easiflow cup, while the microwave and cold water set (£19.99) features a unique link-up with Milton whose sterilising tablets are part of the £15 worth of bottles, teats etc inside.

A new Easy Grip bottle in pink, lilac or blue, has also been a big hit.

The rebranding of the Sangenic Nappy Wrapper into the Tommee Tippee range has just been completed and by January, all three Maws Reassurance monitors – 6, 7 and 8 – will also be incorporated into the Tommee Tippee range.

This year Tommee Tippee won the Best Feeding product category in the Parent Friendly Awards sponsored by Tommy's the baby charity in association with Huggies. The brand also sponsored the feeding area at the Baby Show held at the NEC in May and will do so again when the consumer show hits London in mid-October. And the sponsorship of the baby changing facility at a number of large-scale county shows throughout the summer meant a high profile for Tommee Tippee for tens of thousands of families.

And all the while, the Tommee Tippee Easiflow non-spill cup, the first leakproof cup to be endorsed by the British Dental Health Foundation because of its natural action spout, continues to propel consumers into the weaning and feeding range traditionally led by the Tommee Tippee name.

The latest Easiflow product which aims to teach a child to drink properly from the rim of a cup is also attracting wide attention. The Easiflow beaker with drinkey lid and two straws (£2.99) means that a child can go from weaning to open cup drinking with just one range.

A major £500,000 advertising campaign focusing on the Tommee Tippee touches that set the brand apart from the rest has recently started in the top parenting titles. A series of six ads plus a range ad will roll out until the full



Tommee Tippee rebranding is complete in the first quarter of 2004.

The recent acquisition of Steri-Bottle has also given Tommee Tippee a great opportunity in the convenience sector. Steri-bottle (£1.99 rsp for four) is a ready-sterilised fully disposable feeding bottle that makes life easy for both breast feeding and bottle feeding mothers from birth onwards.

Beloved by celebrity mums like Victoria Beckham who has regularly been photographed carrying one, Steri-bottle has had a storming summer. Meanwhile plans are well underway for the launch next year of the Tommee Tippee

Steri-Bottle, destined to become a must-have product.

For details of the latest promotional offers or to ask a Tommee Tippee territory manager to call, please ring the Sales Office on 0191 250 1864.

Tommee Tippee Deals of the Month

Bottle and Teat Deal –

Buy 6 260ml wide neck bottles, 6 180ml wide neck bottles, 6 Easygrip bottles, 6 Bottle to Cup trainers and 12 packs of Comfort Nuby teats (two flow rates) and get 6 bottle and teat brushes **free**.

Free stock value £19.94 (at rrp)

Deal price £67.20

Feeding Deal –

Buy 6 each of the Easiflow cup, Easiflow beaker, Baby Food pots, weaning bowls, roll 'n' go bib and Icy Bite triangle teether for £136.32 and get 6 packs of weaning spoons and 6 catch-all bibs (value £25.68 rrp) **free**.



Top pharmacy brands

Dry food

1. Farleys/Heinz
2. Cow & Gate
3. Cow & Gate Organic
4. Milupa
5. Hipp Organic

Wet food

1. Heinz
2. Cow & Gate
3. Cow & Gate Organic
4. Heinz Organic
5. Hipp Organic

Finger food

1. Farleys Rusks
2. Farleys Reduced Sugar Rusks
3. Bickiepegs Biscuits
4. Cow & Gate Biscuits
5. Cow & Gate Organic Biscuits

Baby drinks

1. Cow & Gate concentrate
2. Cow & Gate ready to drink
3. Heinz Pure Juice ready to drink
4. Heinz Organic ready to drink
5. Hipp Organic ready to drink

Baby milk

1. SMA Gold
2. SMA White
3. SMA Progress
4. Cow & Gate Premium
5. Cow & Gate Plus

Baby wipes*

1. Johnsons Baby Skincare Wipes
2. Pampers
3. Huggies Cotton Touch
4. Pampers Sensitive
5. Johnsons Baby Extracare

* Not including toddler wipes

Toiletries

1. Sudocrem
2. Johnsons Baby Powder
3. Johnson Baby Oil
4. Drapolene
5. Metanium

Disposable nappies

1. Pampers Baby Dry
2. Huggies Freedom
3. Huggies Pull Ups
4. Pampers Premiums Active Fit
5. Pampers Premiums New Baby Total Care

Source: Information Resources chemists excluding Boots July 13, 2003

New arrivals

Latest babycare products and news

Newest toddler recipes to join the Hipp Growing Up Meals range are Summer Vegetable with Pork & Potatoes and Mediterranean Vegetables with Beef & Rice (£1.09). Suitable from 10 months, the meals are microwaveable and come in fun heart shaped dishes designed to appeal to toddlers.

Other new Hipp toddler food additions are Creamy Rice Pudding with Apple (£0.99) for babies from 12 months and Curried Rice with Chicken Nuggets in a jar (£1.09) suitable from 15 months. For more information telephone Hipp Nutrition on **0845 0501351**.



A dual action product for the relief of the symptoms of colds and flu in children aged two to 12 years is joining the Tixy range. Tixyplus contains diphenhydramine hydrochloride to dry up runny noses and paracetamol to help reduce pain and temperature.

Available as a 100ml oral suspension, the product (£3.49) has a pleasant tasting raspberry and vanilla flavour. The pack features a mother cuddling her child.

The launch will be supported by press advertising over the cough and cold season, promotion through Bounty toddler packs, midwife and health visitor training and sponsorship of key sections of a new edition of the *Mother & Baby Guide to Health*. For more information telephone Novartis Consumer Health on **01403 210211**.

A new decongestant suitable for children and infants aged from three months will be launched in the Olbas range this autumn.

Olbas for Children (rsp £2.19 for 10ml bottle) is an inhalant decongestant oil containing pure plant oils which release vapours to relieve the nasal congestion caused by colds and catarrh.

The launch will be supported by a £1 million national TV advertising campaign. Point of sale material is available. For more information telephone GR Lane Health Products Ltd on **01452 524012**.

A portable plastic medicine container designed to protect children from accidental poisoning by medicine is being introduced by East Coast Nursery Products.

Vita Guard (rsp £12.99) features a child deterrent locking system and has been designed in conjunction with children's health and safety experts. For more information telephone East Coast Nursery Products on **01692 408802**.



Farley's First Milk and Second Milk have recently been reformulated to include nucleotides which have been shown to play an important role in a baby's immune system.

Both milks also contain LCPs (Long Chain Polyunsaturates) which have been shown to be important for the growth and healthy development of a baby's brain, vision and nervous system.

The Farley's milks range has been repackaged in soft coloured packs - yellow for First Milk, mint green for Second Milk and

Continued on page 38

Food allergy affects more kids

More children are being affected by previously little-known food allergies, such as peanut allergy, according to a recent report by the Royal College of Physicians.

Food allergy is becoming increasingly common and is the most frequent cause of anaphylaxis in children.

Almost any food can cause allergy, however, a few foods cause most reactions, particularly egg, milk and peanuts but also tree nuts, fish, shellfish, soya and wheat. Fruits and vegetables now need to be added to that list.

Egg and milk allergies are common in

children. In the majority, reactions are mild to moderate but a small proportion have anaphylaxis. There is a strong association with other atopic diseases, particularly eczema, asthma and rhinitis. Egg and milk allergy resolve in almost 90 per cent of children, usually by the age of five.

Peanut allergy, the most common food allergy to cause fatal or near-fatal reactions, has trebled in incidence over four years and now affects one in 70 children in the UK. Yet only 10 years ago this was a rare disorder.

Allergy to peanuts develops in young children who almost always (96 per cent)

have a history of atopy (most commonly eczema, followed by asthma, allergic rhinitis, egg and milk allergy). The median age of onset of peanut allergy is two years. There is usually a family history of allergy (maternal more often than paternal) and an increased prevalence of peanut allergy in siblings of 7 per cent.

"The diagnosis of peanut allergy creates alarm in parents and GPs because of the risk of fatal reactions. Having gone through a phase of under-management, there is now a tendency for GPs to prescribe an adrenaline auto-injector for all patients," says the report.

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lilac for Follow-on Milk. A smaller ready-to-feed pack (250ml) has also been introduced to meet increasing consumer demand for convenience.

The relaunch is being supported by a £2 million marketing campaign which includes direct marketing, sampling and communication with health professionals. For more information telephone HJ Heinz Co Ltd on **020 8573 7757**.



SMA Progress follow-on milk has recently been repackaged with a colourful new look. Suitable for babies aged from six months up to two years, it is available in tins of powder, 6oz feed sachets and ready-to-feed cartons. SMA Progress contains vitamin C, zinc, calcium, vitamin D, vitamin A and antioxidants. For more information telephone SMA Nutrition on **01628 660633**.



The Avent Feeding Bottle and the Avent Teat, which helps reduce newborn colic, both received 'Best Buy' and 'Best Value Buy' reader awards in *Prima Baby* magazine. Avent sterilisers were also recognised – with a 'Best Buy' for the Express Steam Steriliser and 'Best Value Buy' for the Express Microwave Steriliser. For more information telephone Cannon Avent on **01787 267000**.

Milton Antibacterial Hand Gel, Antibacterial Surface Spray and Antibacterial Surface Wipes, which were launched last spring, are being supported by a 'Milton makes it safe' advertising campaign in the parenting press and women's magazines from this month. Another on-pack and press campaign is planned for later this year to reinforce the different uses for the products and the core Milton sterilising range.

The hand gel (£1.99) is based on a formula used in hospitals by surgeons and has been developed to be effective against all bacteria, fungi and viruses. The product is rubbed into the hands and there is no need to add water or

rinse – it is alcohol-based and dries almost instantly.

The gel is suitable for families when out and about – with the most obvious use being after nappy changing. It will be promoted with special counter display material in pharmacies this autumn.

The surface spray (£1.89) is suitable for keeping kitchens and bathrooms germ free and safe for children and the wipes (£1.99 for 30) are suitable for travelling. All the products are non-toxic. For more information telephone Laser Healthcare on **01282 780558**.

Dr Miriam Stoppard has launched a baby skincare line as a 'sister' range to her Nurture Pregnant Skincare products. Nurture New Baby Skincare products are formulated with mild and gentle natural oils.

The range comprises Soft & Gentle Moisturising Body & Hair Wash, Everyday Pampering Baby Lotion, Enriching Massage Oil, Every Change Protective Nappy Cream and Soothing Nappy Rescue Cream. Retail prices range from £4.50 to £8.00. Each product has been dermatologically tested at Great Ormond Street Hospital. For more information telephone Miriam Stoppard Lifetime on **0207 808 6391**.



Making an appealing impulse buy, the Tiny Love range of developmental soft toys is now being distributed into pharmacies. Suitable from birth, Tiny Smiles features four cute animals – a monkey, bird, frog and elephant. The toys are designed to develop senses and motor skills, creativity and imagination. They are presented in an eye-catching counter top display unit containing an assortment of 20 toys. Retailing at £2.99 each, the toys have 'springy' limbs and a ring for attaching to other toys. For more information telephone East Coast Nursery Products on **01692 408802**.



The Sudocrem and Infacol 'Seek some sanctuary' roadshow will be visiting shopping centres in the North of England in towns such as Stoke on Trent, Newcastle and Nottingham during October.

The roadshow involves a play zone for children whilst adults can soothe away stresses with a complimentary scalp and shoulder

massage. Bags containing branded magnetic photo frames and product information leaflets are given away at each location. For more information telephone Forest Laboratories on **01322 550550**.



Lactase deficiency could be the cause of the pain and discomfort experienced by colicky babies according to recent research at Guy's Hospital. The trial showed that treatment of feeds with lactase (an enzyme that breaks down the lactose in milk) before feeding resulted in a 45 per cent reduction in crying time in around a third of cases. The study was conducted using the enzyme from Crosscare – the same formula as used in Colief Infant Drops.

Britannia Health says the drops can be used by breastfeeding mums from birth onwards by expressing breastmilk into a sterilised container, adding four drops of Colief and feeding back to the baby using a sterilised plastic spoon. Then start breastfeeding immediately. For more information telephone Britannia Health Products Ltd on **01737 773741**.

Nappy Sacks are making more impact on-shelf in new pastel green and blue packaging featuring an appealing baby.

The nappy disposal bags have an odour neutralising fragrance and easy-tie handles (£1.55 for 50, £2.75 for 100).

A pattern of high contrast images inside the lid of the pack has been created in conjunction with The Children's Project to provide a way of entertaining babies at changing time.

The new look will be supported by promotions in parenting magazines, a sampling campaign and in-store promotions with targeted mailings offering money-off next purchase.

A new website www.happysacks.com offers parents advice on caring for their baby. It includes tips from The Children's Project on interacting with a baby. For more information telephone Robinson Healthcare on **01909 735000**.

Nutricia's latest finger food ideas for toddlers (12 months upwards) are fruit bars and a yoghurt-coated cereal and milk bar.

Cow & Gate Truly Fruit Bars come in two varieties – Apple and Plum. Each contains the equivalent of one portion of fruit (one medium-sized apple or two small plums).

Cow & Gate Multi-Cereal & Milk Bar combines seven different cereals with a yoghurt coating. Nutricia says the bar contains as much calcium as in a quarter pint of milk.

Designed for small hands to hold, each bar (£0.39) features four break-off portions. For more information telephone Nutricia Ltd on **01225 768381**.

Why are nucleotides important for babies?

While it's generally known that breast milk offers immunity benefits, it's not so well known that nucleotides are involved in developing the immune system.¹⁻⁶ Because at SMA Nutrition we're always looking for ways to bring our infant formulae closer to breast milk, we've been including nucleotides in SMA Gold[®] and SMA White[®] since 1996.⁶ It's just another example of the way we help take good care of babies.

www.smanutrition.co.uk



IMPORTANT NOTICE: Breast feeding is best for babies. Infant milks are intended to replace breast milk when mothers do not breast feed. Good maternal nutrition is important for the preparation and maintenance of breast feeding. Reducing partial bottle feeding may have a negative effect on breast feeding and reversing a decision not to breast feed is difficult. Professional advice should be followed on infant feeding. Infant milk should always be prepared and used as directed. Unnecessary or improper use of infant milk may present a health hazard. Social and financial implications should be considered when selecting a method of infant feeding.

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Summer sales shone

Although consumers have been unable to resist bargains in the summer sales, and the hot weather boosted demand for seasonal products, the evidence is that until June it had been a less than glorious season for retail pharmacists.

Overall, high street sales rose in total by 4.4 per cent in the year to July, according to official figures. This followed a year-on-year increase of 5.9 per cent in June – the steepest since the end of 2001.

In the three months to July total sales were 4.6 per cent higher than at the same time last year, up from 4 per cent growth in each of the two previous quarters. But in the summer of 2002 sales were increasing at an annual rate of around 5 per cent, and by more than 6 per cent in 2001.

Official figures for retail sales of pharmaceutical, cosmetic and toilet goods show that year-on-year sales grew in value by 6 per cent in June, following increases of around only 2 per cent in the three previous months.

The latest picture of chemists' business is provided by the Confederation of British Industry's retail survey. This suggests that volume sales growth declined by 4 per cent over the year to July.

The British Retail Consortium, which doesn't provide actual sales figures for individual sectors, reports anecdotal evidence that July was "another good month for skincare products". Suncare and family planning products sold well, while healthcare products also showed "pleasing sales growth, in particular analgesics".

Official estimates of spending on pharmaceutical products in the first quarter of 2003 reveal a

volume fall of 1.6 per cent compared with the previous quarter, but a 1.6 per cent rise year-on-year. In the first quarter of last year volumes grew at an annual rate of 4.4 per cent. In value terms and unadjusted for seasonal variation, demand fell 10.2 per cent in the first quarter of 2003, to £726 million, but rose 2.1 per cent over the year.

The volume of consumer spending on electric personal care appliances jumped 13.4 per cent annually in the first quarter of this year, but dropped by 18.4 per cent between the latest quarters. The value of sales rose by 16.1 per cent annually but fell 36.9 per cent in the first quarter.

High street prices of chemists' goods fell by an average 0.3 per cent during July, and were 1.3 per cent lower than a year earlier – the 17th successive decline. Retail selling prices in June were 1.2 per cent lower than 12 months before.

Overall high street price inflation, as measured by the all-items retail price index, was up 3.1 per cent in the 12 months to July, from 2.9 per cent the previous month. The Bank of England expects underlying inflation to slip back below the Government target of 2.5 per cent around the end of this year, and to be below target throughout next year.

On the supply side, UK producers' average prices for pharmaceutical products lifted by 0.5 per cent annually in July, and perfumes and toiletries were up 0.7 per cent. Prices of medicinal and pharmaceutical product imports were 1.1 per cent higher in July than a year earlier, and imported perfumes and toiletries were up by 6.4 per cent.

Business statistics

		% change on previous period	% change on previous three periods	% change on year
PRICES AND COSTS				
All items	Jul	0.0	0.1	3.1
Chemists' goods	Jul	-0.3	-1.7	-1.3
PRODUCER PRICES				
Manufacturing industry, excl food, etc	Jul	0.1	0.1	1.3
Chemical industry	Jul	-0.4	-0.4	1.6
Pharmaceutical preparations	Jul	0.0	-0.4	0.5
Perfumes & toilet preps	Jul	-1.6	0.7	0.7
Lip & eye make-up preps	Jul	-0.2	1.6	10.5
Dental & oral hygiene preps	Jul	0.0	0.0	-3.1
Shaving preps, deodorants	Jul	-0.1	-0.1	0.2
Adhesive dressings	Jul	0.0	0.0	2.2
AVERAGE EARNINGS				
Whole economy, incl bonus	Jun	1.2	-4.7	3.3
Chemicals, man-made fibres, excl bonus	Jun	1.5	2.0	3.9
OUTPUT				
Pharmaceutical products	Q2	4.8	-2.0	2.6
Perfumes, cosmetics, toiletries	Q2	-3.9	-12.4	-10.9
SALES				
Household expenditure (constant prices)				
Total, £	Q2	1.3	2.5	3.3
Retail sales (current prices)				
All businesses	Jul	0.9	1.6	4.4
Pharmaceuticals, toiletries, cosmetics	Jun	6.3	13.3	6.3
OTHER BUSINESS INDICATORS				
Consumer credit				
Gross lending (£m)	Jun	2.3	3.7	8.7
Unemployment claimant rate	Jul	0.0	0.0	0.0
Unemployment claimant count (%)	Jul	-0.9	-0.2	-10.0

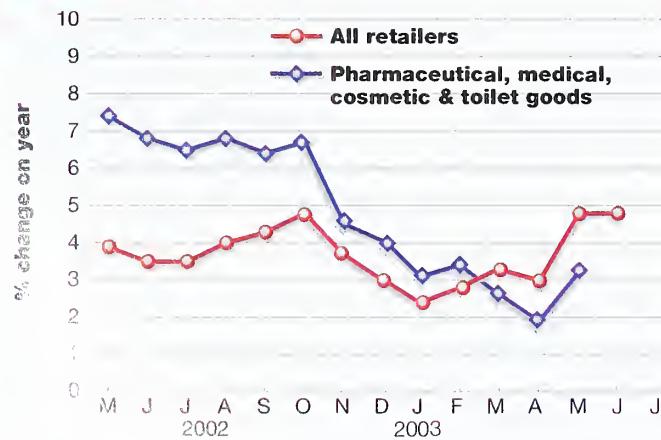
Sources: National Statistics, Bank of England and C&D

Looking to the future, the latest forecast by the CBI is that annual growth in household spending will slow from 3.7 per cent in 2002, to 2.3 per cent this year and 1.7 per cent in 2004. The unemployment rate, which affects consumer spending, is set to rise from 5.1 per cent last year to 5.3 per cent next year, but average earnings growth

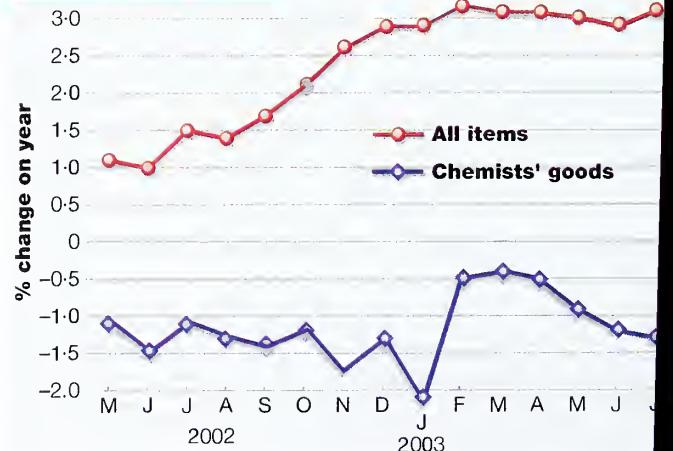
will accelerate from 3.8 per cent this year, to 4.4 per cent.

In the meantime, consumer confidence made a further small gain in July. Researchers Martin Hamblin-GfK say this was due mainly to an improvement in consumers' assessment of the economic climate for spending major purchases. ☎

Retail sales



Retail prices



Dream or nightmare?

Martin Bennett of Associated Chemists' visit to BPC in Harrogate took a strangely surreal course...

I was unable to attend the full British Pharmaceutical Conference this year due to other commitments, however, having seen the exhibitors listed in the *PJ* last week and having received a 'flyer' from one company encouraging me to visit them on stand two and three, I thought I could rush up to Harrogate on Monday afternoon and have a quick look at the exhibition.

I was particularly interested in the Robotic Dispensary and the Prescription Tracking Software and, in fact, whether or not this exhibition would be a good shop window for the range of pharmacy refrigerators which we distribute through our H+H System division.

I arrived about 3pm and asked where I could register to see the exhibition. That was my first big mistake as I should have just walked in and there was every likelihood that nobody would have noticed. Having gone for the official route, I discovered, after a long wait, that you can't just see the trade exhibition – you have to register for the full day (at £135 – members' discounted price). I patiently explained that I was unable to take part in the conference but just wanted to look around the exhibition for an hour or so maximum and that it was already 3pm.

At that stage security became edgy, called for reinforcements and wheeled out "our man from the Society" – whose name I did not catch but who patiently explained to me that it would be unfair to let me in for free" because delegates had paid for the exhibition. I replied that surely it was the other way round and the exhibitors were helping to subsidise the conference – in which case if I was an exhibitor I wouldn't be too pleased if I found out that potential customers weren't allowed to see my stand.

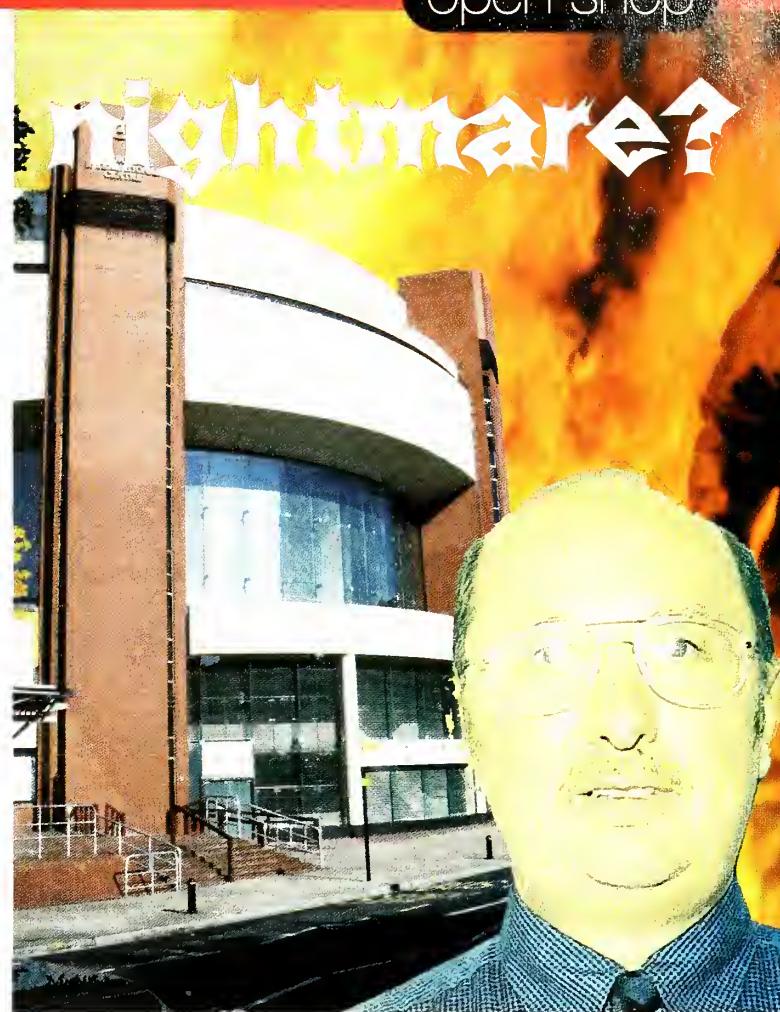
At this stage, with security officers hovering in the

background, good old Sid Dajani arrived and lightened the proceedings no end by offering me his admittance pass to view the stands – I of course declined as the one thing worse than being barred from the exhibition would have been to have been mistaken for Sid.

So I fumed my way back to the car and set off home cursing the £3.50 I'd wasted on parking (not to mention the £195 I'd wasted on the Society) and of course I took a wrong turning ... then it dawned on me, I was free. No exhibition to see ... and on my way to the Yorkshire Dales.

So that's how I found myself sipping coffee on the banks of the Wharfe at Burnsall in the late afternoon sun after a beautiful drive via Bolton Abbey and Appletreewick. At this stage I think I must have dozed off because I have this dream-like recollection of picking up a newspaper – *The Harrogate News* – and reading the following:

"Riot at Conference. There were amazing scenes earlier today at the British Pharmaceutical Conference. Inspector Knacker, a senior police officer from the Hooligan Intelligence Unit said:



said Anthony Cox, a prominent pharmacy activist.

"There seems to have been a power struggle between different factions within this semi-secret Society. High handed action from one of the Establishment's henchmen resulted in a confrontation at the entrance to the conference. Initially it appeared that things were beginning to calm down, when Council member Sid Dajani

burning so-called evidence.

"At this stage the police called for reinforcements to deal with pharmacists who were climbing on exhibits and spraying everywhere with their mindless slogans. *Say No to Emergency Supplies* and *We hate running totals* were the sort of meaningless graffiti to be seen.

"Eventually an uneasy truce descended on the hall. At one end the Society's old guard barricaded into their regulatory section surrounded by their highly trained loyal guards known as 'The Inspectors' who are adept at hurling copies of *Martindale* at would-be attackers. At the other end the mob wearing 'Save Our Society' logos were busily planning their attack, armed with

5ml spoons, promotional pens and Post-it notes.

"Smoke from the burning CPD stand still rises over the battlefield. Inspector Knacker rubbed his hands enthusiastically and said it was an absolutely disgusting display of mindlessness. An unnamed spokesman from the Society said: 'I'll let Bennett in next year.'"

I was then jolted from my slumber. What do they put in that coffee in the Dales? ☺

Luddites quickly set upon the robot dispensing system with hammers while an older group made for the CPD stand where they started burning so-called evidence

'This was one of the most despicable acts of mindless vandalism it has ever been my pleasure to be involved in. These people that call themselves pharmacists behaved like animals.'

"The incident is believed to have started when a Fellow of the so-called 'Society' was barred from entering the building, however, inside sources indicate that the Society has been riddled with discontent for a number of years. 'It only needed one spark,'

arrived, flaunting his membership pass and shouting: 'Who got the most votes.' An ugly mob quickly appeared and hoisted Sid to their shoulders, chanting:

"Representation not regulation". They stormed the entrance using pharmacy green crosses to batter down the registration booth. Then all hell let loose. Luddites quickly set upon the robot dispensing system with hammers while an older group made for the CPD stand where they started

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For further information, or to arrange an informal visit, please telephone Shirley Drawwater on 01733 240478. To apply for the position please send a CV and covering letter, including the names and address of two referees to **Mrs. Shirley Drawwater, Practice Administrator & IT Manager, The Health Centre, Lansdowne Road, Yaxley, Peterborough, PE7 3JL. Closing date Friday 3rd October 2003.**

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They do it better in Scotland – and now it's official!

Pharmacists in England, suffering the stifling bureaucracy of Richmond House, know it's true. They do it better in Scotland. But why? It was a question that Dr Angela Alexander delicately asked our three chief pharmacists in what was by far the most amusing session of BPC 2003.

Who was going to jump in first? That little pixie, Bill Scott, just couldn't resist. "It is a perception," he intoned. "We have shorter lines of communication. It's difficult not to bump into Frank Owens in M&S. We also have a 'can do' attitude, and the ability to take ideas forward..."

Big Jim, who did not look happy with the question, explained that a different political philosophy existed in Whitehall. Hmm. An acute bit of analysis. And then in a turn of phrase that would have done Sir Humphrey credit, he passed the buck with true panache. "England is committed to a devolved NHS so there are constraints on what can be driven from the centre. There's a powerful political drive to push things down to PCTs which does not seem to be present in Scotland." So it's all the fault of those beastly PCTs, is it?

And let's not forget Wales. Carwen Wynne Howells, ever the diplomat, explained: "We do not have the degree of independence of Scotland or the size of England." It took the session's chairman, Olivia Timbs, a lady with some experience of political translation, to explain that, yes, this meant they make a better fist of it in Scotland.

Do the chief pharmacists try to work together, another questioner wanted to know. The general consensus was that they do, but not much. As Mr Scott so eloquently put it: "We don't so much dance together – it's more like a ravel!" The (largely) English audience, obviously unused to such levity from a civil servant, took this on the chin without so much as a titter.

There's an elephant in my speech

How do you pull together dehydrated elephants, pharmacy practice and materials science?



Give the conference science chairman's address is the answer. Prof Graham Buckton, whose area of expertise is materials science, was in danger of taking the 'bullshit baffles brains' approach when he told the audience: "No one wants a dehydrated elephant, but it's nice to know what you can do with it. It's not hard to dehydrate an elephant and grind it up into a powder. The hard bit is to add water and get it back..."

He wasn't the only one on a soapbox though. Conference delegates could not help but notice how this year's illustrious Society president grew in stature between Monday and Tuesday. Our Gill, flowered on her home turf, grew a

good nine inches overnight and by Tuesday was able to eyeball delegates over the lectern rather than through it. Not that we are in the slightest bit sexist, but with the number of short women in top positions at the RPSGB – Mesdames Lewis, Stone, and Ewing also come to mind – you would have thought this problem might have been anticipated.

Our Gill was hitting her stride by the time it came to the president's address. In modulated tones that would have sounded quite at home on Radio 4, she reminded us all (again) that we were in God's Own County, and that she was a Yorkshire lass. However, the local dialect was back

with a vengeance afterwards when she confessed that she "ad'ad to 'ave a bit o'practice but it were worth it".

It has to be said that compared to some of the shambles of years past, BPC 2003 was rather well organised. A decent venue helps, but some credit must go conference czar W Dove for some other well-overdue changes.

The conference banquet, a dolorous affair in recent years, has been banished in favour of an informal dinner. Last ditch attempts by diehard conservatives for the top table to remain black tie were fought off, although our Wally was seen sporting a rather snazzy waistcoat. Next year's challenges should include reducing the cost and increasing attendance. Community pharmacists are definitely an endangered species at the BPC these days.

The long and winding ramp

As for the Harrogate Conference Centre, it was obviously designed with a healthier heart in mind. To proceed from the exhibition hall to the main auditorium, delegates found that the trek up a long and shallow helical slope instead of an escalator helped stave off any seated seminar-induced DVT. As for the trip down, anyone remember their skateboard?

One notable absence from this year's event was NPA chief John D'Arcy. Returning from a jamboree Down Under he missed a flight connection (the connecting flight was cancelled). Parted from his luggage and faced with an 18-hour delay he failed to make it back in time to chair the 7.45am breakfast session on Tuesday.

Also a bit grumpy were those members of PSNC facing a dash down south to attend the committee's monthly meeting, with a heavy agenda including the fate of the contract ballot and PSNC's new constitution. This clash of diary dates does nothing to indicate joined up thinking in pharmacy's more senior echelon.



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unlikely to affect the breast-fed infant adversely. **Undesirable effects:** Dyspepsia, nausea, vomiting, gastrointestinal haemorrhage, diarrhoea, mouth ulcers, fluid retention and oedema, exacerbation of peptic ulceration and perforation, urticaria, angioedema and various rashes have been reported rarely, jaundice and thrombocytopenia (usually reversible), aplastic anaemia, and agranulocytosis have been reported. Transient local irritation of the buccal mucosa may occur, and taste perversion has been reported in trials. **Package quantities:** Strefen is available in cartons of 16 lozenges. **MRRP:** £3.00 (16 lozenges). **Product licence number:** 00327/0135. **Product licence holder:** Crookes Healthcare, Nottingham NG2 3AA. **Legal category:** P. **Date of preparation:** August 2003. **Reference:** 1. Bell-Si et al. Efficacy and tolerability of the anti-inflammatory throat lozenge flurbiprofen 8.75 mg in the treatment of sore throat - A randomised, double-blind, placebo-controlled study. Clin Drug Invest 2001; 21(3): 183-193. URT000251.

To receive copies of the pharmacist and pharmacy assistant sore throat management training manuals or a clinical paper summary, telephone 0115 900

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From January 2005 all pharmacy staff who work in the dispensary will have to have achieved a minimum training standard.

The Royal Pharmaceutical Society decided in 2001 to move towards the mandatory regulation of pharmacy support staff – and that means medicines counter assistants as well as those working in the dispensary.

Pharmacists may be understandably concerned at the additional cost this will involve for themselves and the added commitment it will demand from staff. But for customers it will be one step further along the road which will eventually recognise in full the importance of the role played by pharmacy in the community and the impartial, well-informed advice which staff give.

On a lighter note, all those extra hours of study and the extra responsibility that the qualifications will bring will not only give you more confidence in your daily interaction with customers and colleagues – it could also be a very handy bargaining tool when it's time to start the annual wage negotiations. Extra qualifications, extra remuneration – we know it makes sense!

Lesley Keen

Activa takes 'heart's little helpers' nationwide

Following the success of last year's pilot scheme, Activa Healthcare is taking its 'Heart's Little Helpers' campaign nationwide.

Activa will be offering free leg

health checks in selected Superdrug and NCC pharmacies next month to show customers how to spot the first signs of venous disease.



The art of life with diabetes

Roche Diagnostics is using art to help physicians and childhood sufferers understand all aspects of living with diabetes.

The company hopes that the Accu-Chek Art Competition will help children to express their feelings about the disease and lead to ways which help

improve care through treating the condition holistically.

The art competition, which is supported by the International Diabetes Foundation, features the winning artwork from children and teenagers from more than 20 countries at the 2003 IDF



Conference in Paris, where worldwide winners will be decided.

Next year's competition will be launched on World Diabetes Day, November 14.

The latest winner of the Cambridge Counterpart monthly bottle of champagne is Isabel Kennedy (centre) of the Munro Pharmacy in Strathaven, South Lanarkshire. Isabel has been supervised by pharmacist Lorna Maxwell (left). She was presented with her champagne by Elizabeth Lynch (right), territory manager for course sponsors Wyeth Consumer Health



Spend a penny with new credit card

It is estimated that more than 70 per cent of UK adults may be affected by bladder problems and the new Just Can't Wait card is designed to support those who need urgent access to a toilet.

The card has been developed by two charities – Incontact, the organisation for people with bladder and bowel problems and RADAR, the disability body

run by and for disabled people.

The same size as a credit card, the Just Can't Wait card can be presented to shops and other businesses to help gain special access to a toilet or to find out where the nearest facilities are.

Copies of the card and an educational guide for staff are available from www.incontact.org or by phoning 0870 770 3246.

Jenny is our 12,000th registrant!

Cambridge Counterpart, the Pharmacy assistant Development course sponsored by C&D and Wyeth Consumer Healthcare, has attracted its 12,000th registrant!

And Jenny Akehurst, who is 17 and has been working on Saturdays at HM Dickenson at Eltham in South East London, helped us make it a very special event.

Jenny, who wants to go into nursing when she leaves college, was encouraged to sign up for the course by pharmacist Joanne Ross. She says she was delighted to do so because the extra knowledge is so useful when she is working behind the counter, helping her to work more effectively with her colleagues.

"I love working as part of the team here and I enjoy the interaction with the customers. We have a really good atmosphere in the pharmacy," she said.

She also believes that the knowledge she gains on the

course will stand her in good stead when she has finished college and is looking to start her nursing career.

When we visited her at Eltham, Jenny was still anxiously awaiting her GCSE results before starting to study for A levels in sociology, psychology, English literature and French.

Pharmacist Joanne says she encourages all the assistants working with her to sign up for Cambridge Counterpart.

"Jenny has completed the first few modules and she is doing very well," she said. "We have a very wide range of customers – with a big estate behind us and million-pound homes across the road."

Wyeth territory manager Sarah Deakin presented a delighted Jenny with a lovely, colourful bouquet and *Over The Counter* editor Lesley Keen presented her with high street vouchers worth £40.



Pictured clockwise from left:
Jenny with her colleagues at HM Dickenson, including pharmacist Joanne Ross (right), who encouraged her to sign up for the Cambridge Counterpart course, and Wyeth territory manager Sarah Deakin (left); Jenny in her customary place behind the counter at HM Dickenson; Jenny outside the pharmacy with the flowers presented by Wyeth; Jenny and Sarah

Next it's Debbie's turn for a treat



The latest winner of our Reader Treat in association with Orovite 7 is Debbie Hunn.

Debbie, who works at the Stallion Pharmacy in Hove, near Brighton, was nominated by pharmacist Susanna Parker.

Sadly, when we called to deliver the good news, Debbie was taking a few days off, but Susanna was sure she would be delighted with her day of pampering at a nearby health spa as well as a visit from the Orovite 7 Stress Buster Team.

"Debbie really deserves a treat," said Susannah. "She has worked at the pharmacy for eight years and she has battled through a life-threatening illness to come back to work full-time."

"She really is an inspiration to her colleagues and customers alike as she is always cheerful and nothing is too much trouble. She is a fantastic worker and is very keen on learning new things."

She said Debbie, who is

married and has two children still at home, enjoys the community feeling in the pharmacy, where she is able to get to know the customers, many of whom visit the pharmacy two or three times a week.

Our winner from the July issue, Maureen Pattinson, is pictured (left) with Orovite 7 stress buster Martine Davies when the team visited Maureen and her colleagues at Knights Pharmacy at Rochester in Kent.

Don't forget, you can still nominate a colleague (or yourself) for a Reader Treat. Just send the name of the person who deserves the treat with the name of the pharmacy where they work, a daytime telephone number and the reason they deserve a little pampering. If you are nominating a colleague, please sign and print your name. Write to: Over The Counter/Orovite 7 Reader Treat, Sovereign House, Sovereign Way, Tonbridge, Kent TN9 1RW.

WINNERS GALORE! Test Your Knowledge/Freebie winners

Congratulations to the following Over The Counter readers whose names were chosen as Test Your Knowledge or Freebie winners.

As always, there are more chances for you to test your knowledge and win in this issue – and we have two freebies this time.

So what are you waiting for? Enter now and your name could be on this list in our next issue:

Bottles of champagne go to:

Test Your Knowledge headache and migraine

feature: Donna Clague, of CA Ferrelli, Castle Pharmacy, Caerwrwle, nr Wrexham; Test Your Knowledge baby problems feature: RJ Boldero, of the Royal of Wales Hospital Pharmacy, Bridgend; **Test Your Knowledge babycare feature:** Sarah Dow, of Rowlands Pharmacy,

Bournemouth; Test Your Knowledge bowel cancer feature: Lorraine Walker, of Meerapharm, Wolverhampton; **Test Your Knowledge foundation feature:** Lucy Overton, Alan H Screen Pharmacy, Bishops Castle, Shropshire.

Packs of Mentholatum Migraine Ice patches go to:

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Macclesfield; Allison Milton, of HB Ness Chemist, Airdrie; Mrs JM Richards, of GJ Hendra, Penryn; Mrs I Rogers, of Boots, Sevenoaks; Kate Walker, of Kirkheaton, Huddersfield; Tracy Bonner, of Fartown, Huddersfield; Anne Iles, of Gloucester Royal Infirmary Pharmacy; Heather Train, of Boots, Poplar; Miss F Jumani, of Asda Pharmacy, Leyton; Rita Hodkin, of Vantage Pharmacy, Sheffield; Miss JH Felstead, of Co-op Healthcare, Oldham; Louise Campbell, of Gibsons Pharmacy, Limavady, Co Londonderry; Kathleen Cumming, of R&J Marshall, Alva; Susan Marston, of JM McGill, Wath-upon-Dearne; Mrs RJ Docherty, of Lloydspharmacy, Ashford; Wendy Spry, of Lloydspharmacy, Ringwood, Hants; Jenab Yusuf, of Scholes Pharmacy, Preston; Mrs MP Kershaw, of Cranford Pharmacy, Knutsford; Miss V Gardner, of Parker Davies Chemist,

Saltash; Norma Staines, of Taylors Pharmacy, Romiley, Stockport; Tracey Gibson, of Gloucester Royal Infirmary Pharmacy; Jean Jones of Lloydspharmacy, Balsall Common; Norma Boothby, of Lloydspharmacy, Langridge, Preston; Sharon Higher, of Rowlands Pharmacy, Kettlethorpe, Wakefield; Mrs D Copeland, of Lloydspharmacy, Wallingford; Mrs Siddiqui, of Boots, Hays Galleria, London; Jackie Burkin, of Quarry Hill Pharmacy, Tonbridge; Priti Patel, of West Bergholt Pharmacy, Colchester; Jennifer Moss, of Co-op Pharmacy, Garstang; Mrs B Clegg, of Lloydspharmacy, Maidstone; Jill Griffiths, of Boots, Walsall; Chieh Lee, of Sainsbury's Pharmacy, Arnold, Nottingham; Margaret Carroll, of D McMullen Pharmacy, Endon, Stoke on Trent; BC Patel, Barkers Chemist, Battersea.

Now **Tixy**[®] gets cough on colds and flu



NEW



2+

SOOTHES PAIN
& REDUCES TEMPERATURE
DRIES & CLEARS RUNNY NOSES
AND SO HELPS RESTFUL SLEEP

SUGAR & COLOUR FREE

Paracetamol and Diphenhydramine

Tixyplus offers everything mums need to take on the symptoms of colds and flu.

- Specially made for children and has a great tasting vanilla and raspberry flavour.
 - Dual action of paracetamol and an antihistamine.
- Backed by a targeted parenting ad campaign to send mothers to your pharmacy.

Now Mums kiss it better with **Tixyplus**[®]

New Tixyplus Active Relief for Colds & Flu,
tough on symptoms – and a plus to your profits

Content: Oral suspension containing 7 mg Diphenhydramine Hydrochloride and 120 mg Paracetamol in 5 ml. Indications: Mild to moderate pain including headache, aches and pains and sore throat, reduction of temperature due to feverishness, relief of nasal irritation and nasal discharge. Symptomatic relief of colds, influenza, and feverishness. Particularly suitable where symptoms result in disturbances of sleep. Dosage and administration: 2 to 5 years – 5 to 10 ml three times a day, 6 to 12 years – 10 to 20 ml three times daily. Do not use for more than 3 days without consulting a doctor. Children under 2, adults and children over 12 – Not recommended. Contraindications: Hypersensitivity to any of the ingredients. Acute asthmatic attacks. Precautions: Severe hepatic or renal dysfunction, cardiovascular disease, porphyria, glaucoma and epilepsy. Avoid concomitant paracetamol or antihistamines. Side effects: Drowsiness, dry mouth, dizziness, fatigue, upset stomach, palpitations, hypersensitivity such as skin rash; few reports of blood dyscrasias. Interactions: Tricyclic antidepressants, hypnotics, anxiolytics, metoclopramide, domperidone, diphenhydramine. Legal category P. Recommended retail price: £3.49 (100 ml). PL No.: PL 0030/0091. PL Holder: Novartis Consumer Health, Wimblehurst Road, Horsham, West Sussex RH12 5AB. Date of preparation: August 2003.

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Deflatine's facelift

Roche is introducing a new look for the trapped wind remedy Rennie Deflatine. The 36-pack and 18-pack rolls have been repackaged with a new modern design to give the brand increased impact. The company is investing £1 million in marketing support for the brand until the end of the year, including national press advertising.

Roche Consumer Health
Tel: 01707 366000.

Rapid relief

Alka Rapid Crystals are sachets of citrus flavoured granules containing aspirin 500mg which can be taken without water. The product is designed to provide a convenient way of treating a 'morning after' headache on the move. A pack of 10 sachets retails at £3.29.

Laser Healthcare,
Tel: 01202 449700.

Cranberry Canesten

Bayer is relaunching Canesten Oasis cystitis treatment with a new cranberry flavour. Canesten Oasis Cranberry is formulated to reduce acidity levels in the urine to relieve the burning pain of cystitis. A pack of six sachets retails at £4.25.

Laser Healthcare,
Tel: 01202 780 558.

Blackcurrant Direct

Reckitt Benckiser is launching a blackcurrant alternative to its Lemsip Max Strength Direct Lemon micro-granules which dissolve on the tongue without water. Each sachet contains 1,000mg paracetamol and 12.2mg phenylephrine and a pack of 10 retails at £3.99.

Reckitt Benckiser plc,
Tel: 01482 326151.

TENS moment for Radian B

Ransom Consumer Healthcare is introducing the Radian B TENS machine in response to customer demand for effective, natural, drug-free pain relief.

TENS works by sending electrical signals through pads on the skin to act directly on the nerves, stimulating the body's own defences against pain.

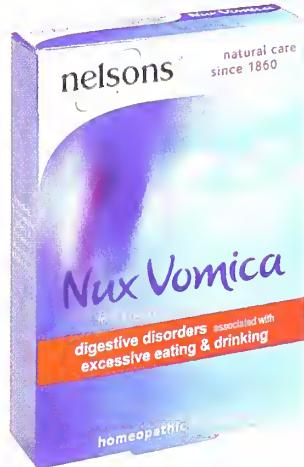
Brand manager Suzanne Corne said the machine offers "a solution to consumers whose lifestyles are impacted by serious ongoing pain and who are already trying alternatives, wishing to cut down on the reliance on painkillers".

Radian B TENS (£49.95) consists of a compact TENS kit with advanced digital technology offering dual channel with individual channel intensity control and seven pre-set programs.

Ransom Consumer Healthcare,
Tel: 01562 437615.



Nux Vomica homoeopathic hangover help



Homoeopathic medicines specialist Nelsonbach is launching Nux Vomica in its ready formulated range in time for the Christmas overindulgence season.

The product, which makes the claim of symptomatic relief from 'excessive eating and drinking' is a natural remedy extracted from the seed of the Strychnos nux vomica tree. The tasteless, non-effervescent tablets, which can be taken without water, will not cause

reflux or exacerbate nausea. Marketing controller Annie Cripps said: "With research showing that five per cent of the population would be interested in a homoeopathic hangover cure, the addition NuxVomica to the ready formulated range seems to be the natural step."

A pack of 72 tablets retails at £4.20.

Nelsonbach,
Tel: 0800 289515.

Promotion

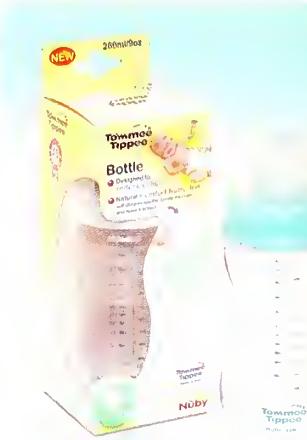
Feeding on success...

It was a major step for Jackel International to decide to phase out Maws, its brand for newborn babies, and focus on creating a single **Tommee Tippee** brand to run right through from pre-birth to independence.

But the launch three months ago of a completely new **Tommee Tippee** range of bottles, teats and soothers in new packaging has been a

major success for the independent pharmacist. The performance of the Comfort Nuby teat – the only teat with little nubs all over it to soothe and massage baby during feeding – has been very encouraging. Customers like the way the teats – in three flow rates or non-spill – help babies make the transition from breast to bottle while the anti-colic feature has helped sales

uplift. The new wide neck waisted bottles have also been a hit and the inclusion of bottles and teats in both **Tommee Tippee** sterilisers has meant repeat purchase on a major scale. For details of the **Tommee Tippee** Comfort Nuby range and how to buy into the **Tommee Tippee** success story, call Jackel International on 0191 250 1864.



Brand focus



Red Oil rolls on relief



Quattro cuts a dash

Wilkinson Sword claims a world first with the new Quattro, which has four blades mounted in the razor head – and promises to deliver the company's "closest and smoothest shave ever". The blades are synchronised to allow maximum contact over the contours of the face. Two strips are infused with vitamin E and aloe vera and protective wires around the blade react if there is too much pressure exerted.

The Quattro retails at £6.49 with two replacement heads and further blades are in packs of four (£6.79) or eight (£12.35).

Wilkinson Sword Ltd,
Tel: 01494 533300.

New Radian B Red Oil is a novel roll-on treatment for aches and pains.

With natural ingredients including mustard oil, oil of cloves and arachis oil combined in an easy-to-use applicator, the rubefacient can help relieve muscle pain, lumbago and rheumatic pain.

Ransom Consumer Healthcare says Radian B Red Oil offers soothing liquid warmth, increasing blood flow in and around the affected area with its effectiveness measured by a slight reddening of the skin on application.

Red Oil complements the Radian B range which includes muscle rub and lotion, spray and an ibuprofen gel.



Chemist Brokers,
Tel: 023 9222 2500.

The gentle touch for teeth

New from GlaxoSmithKline is the Sensodyne Total Care toothbrush for people with sensitive teeth.

The new generation brush, which replaces the Sensodyne Gentle Ultra and Elite, features end rounded filaments and a small domed head. The ergonomic handle is designed

to ensure a comfortable grip and aid cleaning and the brush is the latest in a series of brand developments.

The Sensodyne Total Care brush retails at £2.59.

GlaxoSmithKline Consumer Healthcare,
Tel: 020 8047 2700.



**More product news with all our
Over The Counter features...**

Can you spot the Yeast Vite customer?



Mrs Wheeler's four children have now gone back to school after a long and hectic eight week summer holiday. It wasn't much of a holiday for Mrs Wheeler, aged 41 and the effects are beginning to show. She just doesn't have any energy and even feels tired when she gets out of bed in the morning.

Here is a typical customer who could benefit from the recommendation of Yeast Vite Tablets. Yeast Vite is a fast, gentle pick-me-up that brings speedy relief from tiredness and has a unique formulation, containing Vitamins B1, B2 and B3 (Nicotinamide) together with caffeine.

The retail price for Yeast Vite Tablets (all GSL) 24s, 50s, 100s is £2.09, £3.35 and £4.99. Further information available from the licence holder: Thornton & Ross Ltd, Huddersfield HD7 5QH.



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Clearer results

Unipath is launching the Clearblue Digital Pregnancy Test. The result is displayed in the words 'Pregnant' or 'Not Pregnant' through a liquid crystal display. Each pack contains three tests and retails at £14.99.

Unipath Ltd,
Tel: 0800 267448.

Complete comfort

AMO has reformulated Complete soft contact lens solution to improve comfort and protection from dryness. Complete MoisturePlus solution contains a dual hydrating system and taurine to help protect solution pH levels in the eye. AMO UK Ltd,
Tel: 01628 551600.

on the COUNTER

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Mentholatum update

The Mentholatum Company has given its website a smart new look, offering a user-friendly guide to the Mentholatum portfolio of products. A spokesman for the company said: "We were keen to make sure that both new and existing customers know that we are more than the UK's largest supplier of topical analgesics. We also wanted to promote the rest of our portfolio and to make sure our latest products such as Softlips lip balms and Rohto eyecare products were properly showcased." www.mentholatum.co.uk

Changing times

Nappy Sacks have a new look featuring a baby on a pastel green and blue background. Images inside the lid are designed in conjunction with The Children's Project to entertain babies at changing time. Nappy Sacks feature an odour neutralising fragrance and easy-tie handles.

Robinson Care,
Tel: 01246 505454.

Decoding constipation

Dulco-lax continues its 'Decoding constipation' campaign with a new consumer leaflet and a new website to give consumers and sufferers access to information in the privacy of their own homes. Leaflets are available free by calling 01344 741493. www.dulcolax.co.uk

Fizz off flab

NatraHealth is targeting slimmers with effervescent tablets containing a form of chitosan – an extract from shellfish shells. Bio Slim Silueta tablets are said to "act like a magnet, binding to the fat in the diet which then passes naturally and safely through the body". A pack of 20 costs £11.99.

NatraHealth,
Tel: 01732 860850.

Minty NiQuitin CQ

New NiQuitin CQ 2mg and 4mg Mint Lozenges from GlaxoSmithKline Consumer Healthcare use the same method of dosing as the original variant. Smokers who light up within 30 minutes of waking should use the 4mg lozenge while the 2mg product should be used by those who first smoke 30 minutes or more after waking. The launch will be supported by a marketing campaign including poster advertising from October. A pack of 36 lozenges retails at £8.99 and 72 at £17.49.

GlaxoSmithKline Consumer Healthcare,
Tel: 020 8047 2700.



New look and a new formula

Sensodyne Mint toothpaste has a new look and a new formula.

The new packaging is designed to combine the messages of efficacy and modernity.

Each variant is colour coded in shades familiar to current users and the modern graphics and clearer wording aim to appeal to younger and new users. The back of pack

information helps consumers to understand both tooth sensitivity and how Sensodyne can help.

The new formula offers three benefits – an enhanced flavor, improved texture and the addition of fluoride for increased protection.

GlaxoSmithKline Consumer Healthcare,
Tel: 020 8047 2700.

Sportflex scores at rugby

The first fruits of Seven Seas SportFlex rugby sponsorship appear in October when advertising featuring three of England's Grand Slam winning rugby squad breaks at the start of the rugby World Cup in Australia.

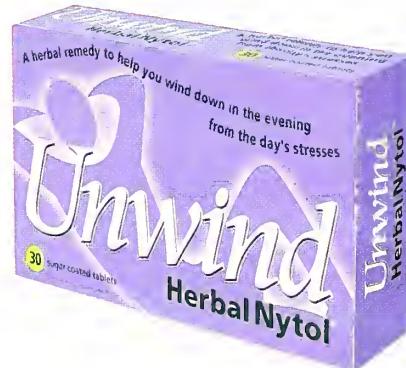
Two alternating advertisements show photos of the players and the SportFlex tub. The two straplines read: 'The Art of Staying Ahead is to Remain Flexible'; or 'One Try and You Could be Converted.'

The first burst of the £250,000 campaign runs in national daily newspapers and health and lifestyle magazines throughout the World Cup. SportFlex sponsorship of Team England Rugby continues through 2003 and the Six Nations tournament next year.

Seven Seas Ltd,
Tel: 01482 375234.



Unwind with herbal help



New Unwind Herbal Nytol is designed to help consumers relax in the evening and wind down gently, creating a new evening stress category.

Products are currently divided into daytime stress products and sleep aids and GlaxoSmithKline sees an opportunity with the evening stress sector.

Unwind Herbal Nytol, which contains valeren, wild

lettuce and hops, is aimed at people experiencing life stress caused by work and family worries which can interfere with evening relaxation.

The 30 sugar-coated tablets (£4.99) are in a lid pack with a soft image of a relaxing figure.

GlaxoSmithKline Consumer Healthcare,
Tel: 020 8047 2700.





Well, the entries are coming in and soon it will be over to you to decide whose products, services and support have had the greatest impact on your working day! Soon an independent panel of pharmacy assistants will be choosing the finalists and in the next issue you'll see just who is in the running for an award in each of five categories. The sixth and final category will be entirely up to you, our readers – you have the chance to vote for the **Pharmacy Assistants' Choice**.

And just in case you need any incentive to fill in the voting form which will appear in the January issue, everyone who sends in a completed form and correctly answers the qualifying question has the chance to win a fabulous new Ford Ka, courtesy of Nestlé Build-Up Nutrition.

The Over The Counter Awards categories are:
OTC medicine launch of the year – the medicine which best met the needs of your customers.

Beauty launch of the year – the beauty product which has



– help us reward the best in pharmacy and you could WIN a Ford Ka with Nestlé Build-Up Nutrition



had customers beating a path to your door.

3 Advertising campaign of the year – it may be an eyecatching trade campaign or a consumer campaign which sent customers flocking to the pharmacy.

4 Supplement of the year – the new launch which has proved most popular and successful in your pharmacy.

5 Pharmacy education campaign of the year – the company or brand which has best helped you to increase your knowledge and service to customers.

6 Pharmacy assistants' choice – over to you to choose the product, the brand or the company which has had the greatest positive impact on you, your pharmacy and your customers.

Remember! All the voting forms will go into the Over The Counter hat and the sender of the first form to be pulled out with the correct answer will be taking to the open road in that fabulous Ford Ka, courtesy of our sponsor, Nestlé Build-Up Nutrition.

Advertisement feature

A chocolate drink with added goodness!

"I asked the pharmacist and he recommended Build-Up. I've known him for years and trust him. I had to get the chocolate one so my husband wouldn't realise the difference to our normal hot chocolate"

Instant Hot Chocolate is the latest addition to the Build-Up Nutrition range, not only does it taste delicious, it's packed full of protein, vitamins and minerals – ideal for customers who have lost their appetite or might not be getting all the essential nutrients from their daily diet.

In fact, **Instant Hot Chocolate** tastes so good, we would like to give you the chance to try it for yourself, just telephone 0800 000030 for a free sample of **Instant**

Hot Chocolate and a free Build-Up pen.

As well as **Instant Hot Chocolate**, there are milky drinks in four delicious flavours – Strawberry, Chocolate, Vanilla and Banana Build-Up. Plus a range of wholesome soups – Chicken, Potato & Leek, Vegetable and Tomato. Also available is Build-Up Original, an unflavoured nutritional boost that can be added to everyday food and drinks.



www.nestle.co.uk

Nestle Nutrition, St George's House, Croydon, Surrey CR9 1NR
Sales enquiries: 020 8667 5130

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Tuning up

Masterfoods is relaunching the Tunes range in a pocket sized flip-top box. Tunes are now longer-lasting, sugar-free oval sweets in three flavours – blackcurrant, strawberry and cherry (37g, £0.49).

Masterfoods,
Tel: 01753 550055.

Triple protection

New Triple Dry Cream Anti-Perspirant from Linden Voss is kind to skin but tough on wetness and odour. The cream is rapidly absorbed and quick drying and one application can last up to three days. The new cream retails at £7.49.

Network Health & Beauty,
Tel: 01252 533333.

Pronatal choice

Sanatogen Pronatal is being launched in packs of 30 (£4.49) and 90 (£12.49) to replace the 60-pack currently available. The smaller size is aimed at new users, while the 90-pack is seen as a 'loyalty' pack.

Roche Consumer Healthcare,
Tel: 01707 366000.

Gavilast arrives

Reckitt Benckiser has extended its Gaviscon range with Gavilast tablets (ranitidine 75g) for longer-lasting relief from indigestion and heartburn. The small, easy to swallow tablets are formulated to help relieve symptoms for up to 12 hours. The launch is being supported with a multimedia campaign running through the rest of this year and the beginning of next. Gavilast is available in packs of six, 12 and 24 tablets retailing at £2.15, £3.99 and £7.19.

Reckitt Benckiser,
Tel: 01482 326151.

Listing prices

Swains has introduced a new edition of its electronic price list – version 1.2. The new version enables retailers to print product information from the price list for quick reference and offers the option of adding messages to each order. The list already offers access to daily updates on the Swains website, sending orders via e-mail or fax, storing items and quick searching.

Swains International,
Tel: 0845 4504242.

Durex plays

Durex Play (50ml, £3.49) is a new lubricant to help people enhance their sex lives. Presented in a modern pump pack, it is transparent, odourless and non sticky and its water-based formulation will not damage latex condoms.

SSL International plc,
Tel: 0161 654 3016.

Oxy spots the saboteur

The teen skincare brand OXY is sponsoring the cult sitcom *Malcolm in the Middle* on Sky One.

GlaxoSmithKline says the show, which stars boy genius Malcolm and his dysfunctional family, has huge appeal to OXY's teenage target market.

The £300,000 deal features four indents which will be screened until February 2004 at the beginning and end of the programme and during commercial breaks.

The indents feature a boy whose chances with attractive girls are thwarted by an



animated spot with attitude and an unwelcome voice which says the wrong thing at the wrong time. The indents end with an OXY On the

Spot pack landing with a th

GlaxoSmithKline Consumer Healthcare,
Tel: 020 8047 2700.

Sensodyne gets extra fresh

New Sensodyne Total Care Extra Fresh is a paste for people with sensitive teeth.

The dual action formula offers the everyday protection of a total care toothpaste with an additional gel layer to give an extra burst of freshness.

The launch aims to appeal to a younger market aged 25-44 who experience sensitivity, but are not yet using a toothpaste formulated for people with sensitive teeth.

The launch of Sensodyne



Total Care Extra Fresh (45ml £2.19; 75ml £3.35) brings the range to six.

A dedicated TV and consumer press campaign will support the launch.

GlaxoSmithKline Consumer Healthcare,
Tel: 020 8047 2700.

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Baby Beanie

Polaroid is introducing the Baby Beanie to help passport photo operators take acceptable pictures for baby passports. Small and comfortable, the Baby Beanie (£29.95) has a white, non-reflective cover to give a good light background for the picture and the fabric can be sponge cleaned.

Polaroid (UK) Ltd,
Tel: 01582 409800.

Trojan force

Carter Products introduces the well-established US condom brand Trojan into UK pharmacies on October 1. The range comprises five condoms: He Pleasure, Twisted Pleasure, Magna Ultra Pleasure and Extended Pleasure.

Carter Products Ltd,
Tel: 01303 858828.

Oil-free for the boys

New Nivea For Men Oil Control is a range of three products to soak up excess sebum, wipe away facial shine and blast the dirt and grime that could turn into spots and blackheads.

Men's thicker skin and more active sebaceous glands mean almost one in three suffer from excess oil and Nivea is launching Oil Control Face Wash, Shaving



Gel and light Moisturiser to address the problem with 'no fuss but maximum effect'.

Naturally astringent marine plant extracts are the key active ingredients and each product also contains vitamins to keep skin protected and conditioned.

Oil Control is in petrol-coloured packs which emphasise the difference from the original Nivea For Men range.

Beiersdorf UK Ltd,
Tel: 0121 329 8800.





An itchy £1,000 donation

The UK Itch Scratch Cycle challenge sponsored by Eumovate Eczema and Dermatitis cream has completed its UK tour with the presentation of a cheque for £1,000 to the National Eczema Society.

Inspired by the vicious cycle of itching and scratching that characterises skin flare-up of eczema and dermatitis, the cycle challenge featured two oversized Eumovate Itch scratch bicycles which visited town centres and local

pharmacies. Consumers and pharmacists were invited to clock up some miles for the National Eczema Society while the second bike toured the towns. Educational leaflets and promotional materials were handed out, along with information about Eumovate, the concentrated rehydration cream which is part of the Eumo family.

GlaxoSmithKline Consumer Healthcare,
Tel: 020 8047 2700.

Getting the Wind-eze up on TV

Wind-eze, the treatment for trapped wind, continues to sponsor Channel 5 weather with a new £300,000 campaign. Three executions entitled Kite, Barometer and Windsock see these items moving in the wind and then settling to convey the efficacy of Wind-eze. As well as the TV deal, GlaxoSmithKline is promoting

education and information to create better awareness and understanding of the condition.

Wind-eze is available as chewable peppermint tablets (10, £1.99; 30, £3.59) and soft gel capsules (20, £3.59).

GlaxoSmithKline Consumer Healthcare,
Tel: 020 8047 2700.



HEAT YOUR HEART OUT

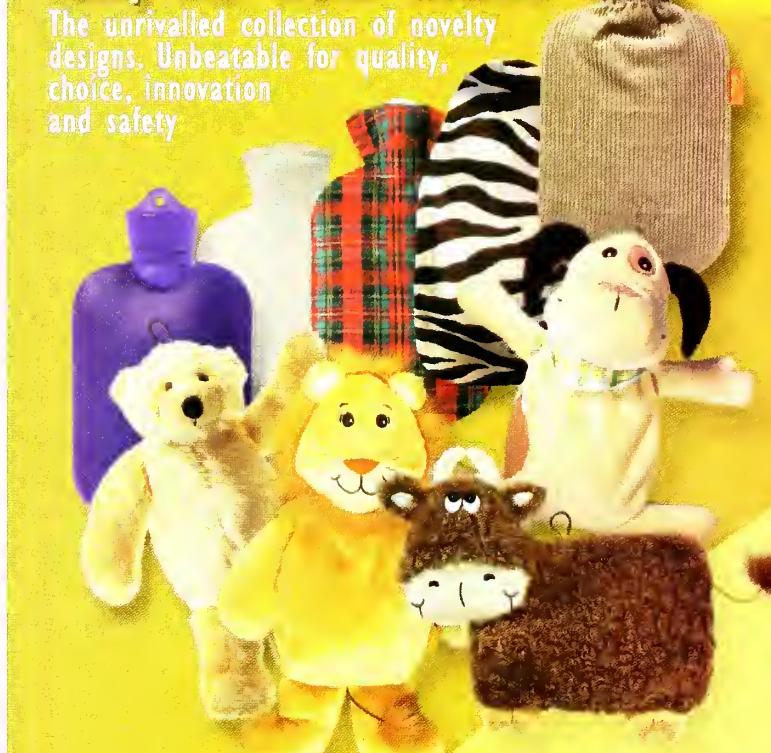
Natural Heat - Fashy Hot Packs

Grain cushions to be heated in the oven or in the microwave with washable cover



Fashy Hot Water Bottles

The unrivalled collection of novelty designs. Unbeatable for quality, choice, innovation and safety



Fashy hot water bottles are manufactured to British Standard B.S. 1970:2001, with jointless neck preventing leakages, odourless material, recyclable, brilliant and fadeproof colours.

fashy

Warmth & Wellbeing

For more information please contact:

Fashy UK Limited
192 Alma Road
Charminster
Bournemouth BH9 1AJ

Tel. 01202 515251
Fax 01202 531409
fashyuk@lineone.net
www.fashy.com

on the

PoliGrip back on screen

GlaxoSmithKline is spending £1 million on a new TV burst for the successful PoliGrip advert which shows youthful characters sharing problem foods.

The ad is being screened one week on and one week off until the end of October at peak times to attract younger users and to coincide with new pack

designs plus the launch of PoliGrip Total Care.

A cut-down version focusing on the new easy control tip will be on in the daytime. PoliGrip Ultra is the featured brand variant with the straplines 'Everything's on the



menu' and 'You're in control'.

GlaxoSmithKline Consumer Healthcare,
Tel: 020 8047 2700.

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Hear, hear...

New to the Family Doctor series is Understanding Deafness & Tinnitus (£3.50), written by Professor Tony Wright and published in association with The British Medical Association. The book looks at the structure of the ear and how it works and describes different sorts of hearing loss and how they can be managed. It also explains what tinnitus is and suggests ways to manage it.
Family Doctor Publications Ltd, Tel: 01202 668330.

Chew it over

Novartis Consumer Health is launching a liquorice flavoured coated nicotine replacement gum in the Nicotinell range. Available in 2mg and 4mg strengths and packs of 24 and 96, retail prices will be the same as for the existing fruit and mint flavours. An extra strength mint 2mg lozenge is also being launched, targeting smokers of 30 or more cigarettes a day who are more likely to suffer severe withdrawal symptoms.
Novartis Consumer Health, Tel: 01403 323945.

Attracting users

SCA Hygiene is relaunching three products in the Tena bladder weakness range to help attract new users into the incontinence category. Tena Lady Mini Plus (formerly Mini Long) has a larger fixation area and new edge sealing for improved leakage security. Tena Lady Normal and Extra have a new breathable textile backsheet for odour control.
SCA Hygiene Products Ltd, Tel: 01582 677400.

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Monitoring glucose

The new A1cNow is the first HbA1c (glycated haemoglobin) test available for home use. The easy-to-use, single-use disposable test gives accurate results in eight minutes.
Chirus Limited, Tel: 01923 212744.

Critter vits

An American range of children's chewy vitamins is being launched in UK pharmacies. L'il Critters vitamins, manufactured by Northwest Natural Products, are distributed by the West London pharmacy Caregrange. They include three chewy multivitamins - Gummy Bears, Vita Worms and Vita Beans plus Calcium Gummy Bears and Fruit and Veggie Bears.
Caregrange Ltd, Tel: 0208 749 7313.

New booster

NatraHealth has introduced CoQ Melts, a supplement formulated to provide an instant energy boost. The product contains co-enzyme Q10 which helps protect cells from free radical damage and contributes to immune function. The melts dissolve on the tongue and are absorbed more quickly than swallowed tablets. A pack of 30 retails at £9.99.
NatraHealth, Tel: 01732 860850.

Freshen up

SCA Hygiene has launched a new product grouping into the Bodyform pantyliner range. Bodyform Fresh everyday is being launched to respond to the demands of active women and help them to stay fresh all day. Each variant has been given colour-coded strip to contrast with new silver packaging.
SCA Hygiene Products Ltd, Tel: 01582 677400.



advertising is in eight children's titles.

The campaign emphasises the battery toothbrush's swappable characters, extending their life beyond the bathroom.

GlaxoSmithKline Consumer Healthcare,
Tel: 020 8047 2700.



Tums is back after a pregnant pause

The fruit-flavoured indigestion remedy Tums is back in the public eye with its pregnancy press ad.

Indigestion and heartburn are common in pregnancy and the ad shows that Tums can be used at this time following advice from a doctor. It will appear in key pregnancy titles until the end of December and

a Tums leaflet, including a money-off coupon, will be 6,000 GP surgeries via the Waiting Room Information Service.

Tums is in packs of 36 (£2.25) and 75 (£2.75) tablets.

GlaxoSmithKline Consumer Healthcare,
Tel: 020 8047 2700.

Cambridge Counterpart

Pharmacy Assistant Development



Chemist Druggist

Wyeth

CO-SPONSORED BY
WYETH CONSUMER HEALTHCARE
IN THE INTERESTS OF
PHARMACY



The articles overleaf are taken from the tenth module of the revised Cambridge Counterpart training course

for pharmacy assistants. Module 10 is on babycare and covers topics including breastfeeding, bottlefeeding, equipment and skincare.

This is just a sample of the course to show you how it is structured. To meet the Royal Pharmaceutical Society's standards for medicines counter assistants you will need to register for the course. You can sign up using the form below.

Cambridge Counterpart is a 14-part modular distance learning course that covers everything you need to know to work effectively on the medicines counter. Counterpart is brought to you by Chemist & Druggist and Wyeth Consumer Healthcare.

How to register

Each assistant must be registered for telephone marking and certification at a cost of £35.25. Each assistant will also need access to a training pack. A pack costs £23.50 and can be used by up to four assistants.

Post your completed form, with a cheque payable to CMP Information Ltd, to Mary Prebble, Pharmacy Editorial Projects, Sovereign House, Sovereign Way, Tonbridge, Kent. TN9 1RW

Registration Form

For further information or to pay by credit card, call Mary Prebble on 01732 377269.

Pharmacist _____

Pharmacy _____

Address _____

Post Code _____

Telephone Fax _____

Course registration fee of £35.25 per person

Name _____ £ _____

Name _____ £ _____

Name _____ £ _____

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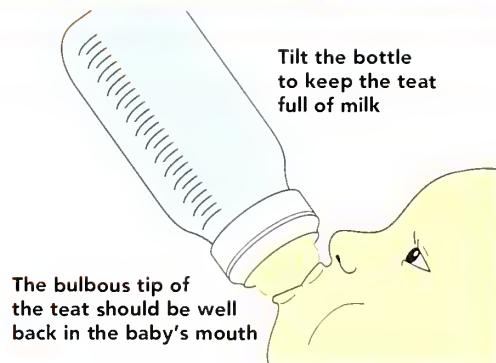
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Please include () sets of modules at £23.50 each £ _____

All prices include VAT £ _____

Total £ _____

10.2 BOTTLE-FEEDING



Some mothers will decide against breast-feeding or will want to combine breast and bottle as the baby gets older.

Babies grow faster in the first year of life than at any other time. They need a special balance of nutrients as their body systems are not sufficiently developed to cope with adult foods. Commercial infant formula are designed to meet these special needs and, although they are not as good as breast milk, they are as close as it is possible to get. Breast milk or infant formula should be the only source of food for the first three to four months.

Infant formula are based on modified cows' milk, with added vitamins and minerals. They may be whey-based or casein-based, which refers to their balance of milk proteins. Casein (curd protein) is heavier than whey.

Both types can be given from birth to 12 months, but whey-dominant milks are better to start with as they are more easily digested and more like breast milk. They can also be used if the mother is combining both breast and bottle feeding, for example, if she has gone back to work. Casein-dominant milks are recommended for hungrier babies and can be given as an intermediate stage before weaning.

If the baby is thriving on a whey-dominant milk there is no need to change. If the mother started bottle-feeding in hospital it is usually best to continue with the same brand unless the midwife recommends otherwise.

The milks are available as powder or in a ready-to-feed form, which is more convenient but more expensive. Powdered milks must be made up carefully, resisting the temptation to add an extra scoop. A too concentrated feed can make the baby ill.

Cows' milk should not be the main drink until the baby is at least a year old, although it can be used after six months for mixing with food. It is too high in protein and sodium for babies and does not contain enough iron or vitamins A, C and D. Instead, follow-on milks can be given after the age of six months and up to two years old. They are not substitutes for breast milk and must not be used as the only source of food but as part of a mixed diet.

Babies who are thirsty can be given cooled, previously boiled water between feeds.

Recently there has been much interest in long chain polyunsaturated fatty acids (LCPs), which are important in the development of the brain, eye and nerves. In full-term babies, these compounds are built up from other fatty acids in the diet but pre-term infants are less able to do this. LCPS are already present in human milk, as are the fatty acids from which they are made. There is evidence that LCPS are beneficial when added to milks for pre-term babies, but there is no official recommendation yet that they should be added to milks for full-term babies.

Special milks

Some babies cannot take lactose or cows' milk protein which are present in standard infant formula. Symptoms of intolerance include diarrhoea, vomiting, colic, wheezing, skin rash and poor weight gain. Refer these problems to the pharmacist, as the baby may need an infant formula based on soya protein instead of casein and whey. These products also contain other carbohydrates instead of lactose.

Some babies suffer from metabolic disorders or digestive problems which need special products used only under the supervision of a doctor or dietitian.



Refer to pharmacist:

- Parents who want to change milks.
- Babies with symptoms of food intolerance.
- Babies who seem to have problems feeding e.g. because of a blocked nose and cold, or those who are unexpectedly drowsy.



Advice:

- Milks must be made up strictly according to the directions on the pack, with freshly boiled and cooled tap water. Bottled waters must also be boiled and be low in minerals; sparkling water contains too much sodium.
- Bottles and teats must be sterile.
- The feed must not be made up with artificially softened water, nor with water left in the kettle from previous occasions as these may contain too many minerals.
- Made-up feeds should be stored in the main part of the fridge (not the door as it may not be cool enough) and used within 24 hours. Partly used feeds should be thrown away.
- The bottle should be warmed just before using, by standing in hot water for a few minutes or in a bottle warmer. Microwaves are best avoided as they heat unevenly and hot spots may scald the baby. The mother can test the temperature by putting a few drops on her wrist.
- Milks should not be kept warm in a vacuum flask as this encourages bacteria to breed.
- Babies should not be left alone with the feed as they may choke.

Remember to use the WWHAM approach!



10.3 VITAMINS



Vitamin A and D supplements are recommended for:

- Breast-fed babies under six months whose mothers did not get a good diet in pregnancy.
- Breast-fed babies after six months if breast milk is their main drink.
- Bottle-fed babies who are drinking less than 500ml (1 pint) of infant formula or follow-on milks a day.
- Children between one to five years unless they are eating foods rich in these vitamins and are exposed to moderate amounts of sunlight (check with the pharmacist if you are not sure).



10.4 EQUIPMENT



Breastfeeding mothers may need breast pads to absorb milk leakage from the nipple.

Mothers who go out to work or who want to delegate a night-time feed to father, might want to express their own milk and store it for later. This can be done by hand or with a battery-operated breast pump, preferably first thing in the morning when the breasts are full. The milk is placed in a sterilised container and can be stored in the fridge for up to 24 hours. It can also be frozen.

Expressing breast milk is not advisable in the first six weeks when breastfeeding is getting established.

For bottle-feeding, mothers will need four to six bottles with a teat for each one and a spare teat for emergencies. Wide-necked bottles are easier to clean. The teat hole must be the right size; when the bottle is held upside down the milk should pass through at about one drop per second.

All feeding equipment must be scrupulously cleaned and, for the first six months, sterilised or the baby will get stomach upsets. This can be done with sterilising solution or tablets, or by steam using an electrical unit or one designed for the microwave. Bottles can also be fully immersed in water and boiled for ten minutes, in a saucepan with a lid, adding the teats for the last five minutes.



BEAUTY COUNTER

When Carol met

Lesley Keen went to Mayfair with our competition winner Carol Dart

Nicky

When we first phoned Carol Dart to tell her she had won an appointment with celebrity hairdresser Nicky Clarke, she couldn't quite believe it.

Carol, who works at the LA Dowrick pharmacy in Torquay, had also entered one of our Test Your Knowledge quizzes in the same issue of the magazine and thought she might have won a bottle of champagne.

Instead, she had been chosen to travel to Nicky's fabulous Mayfair salon in London, to put her head in the hands of the man who has styled the hair of some of the world's most famous and beautiful women.

Carol's friends Dee Thompson and Donna O'Keeffe came along too, to lend her a bit of moral support - and take a peep inside one of London's most exclusive hairdressing salons. The three regularly have lunch and trips out together and, said Carol, Dee and Donna were determined to come along, even if it meant standing outside the salon with their noses pressed against the window!

After a leisurely stroll through some of the most expensive shops in London - window shopping only of course - we had a light lunch and headed for the Nicky Clarke salon in Mount Street.

We were all ushered upstairs to meet Nicky, who whisked Carol off to a quiet corner to discuss just what she wanted.

As she had been growing her hair - and had only had one light trim - since May, when she heard she had won the prize, Nicky had plenty of scope. Together he and Carol decided on a new, layered look for her thick, dark hair, keeping most of the length but giving it a new, fresh look with a sideswept fringe.

Carol was delighted with her new look and Dee and Donna thought Nicky had done a great job. "I've had what can only be described as a fabulous day," said Carol. "I felt like a celebrity. It was so exciting to meet Nicky Clarke and have my hair cut by him. He is a lovely man."

And there was good news when Carol got home to Torquay, because the new look met with universal approval from her family, friends and colleagues. "The only thing is, I can't blow dry it quite like they did in the salon," she said.

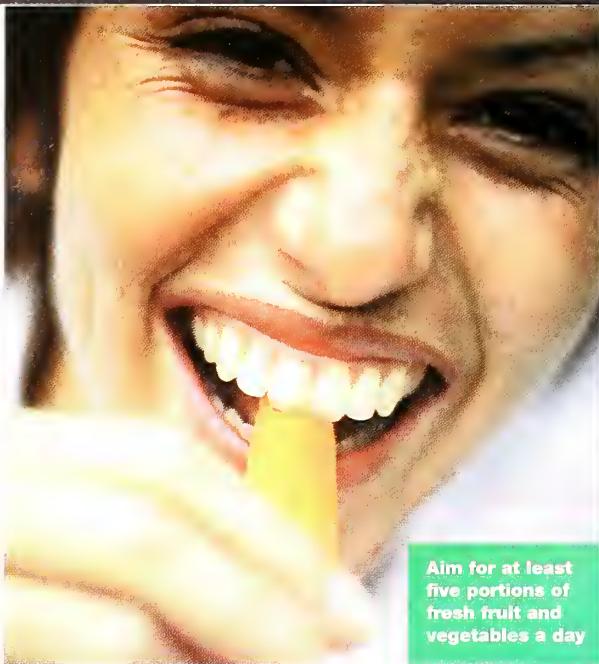
I've had what can only be described as a **fabulous** day



CAROL'S BIG DAY

1. Waiting for the great man
2. Carol with Nicky and her new look
- 3-5. A work in progress
6. The new look
7. Nicky with Carol, Dee and Donna





When summer has packed its bags and gone south, there's no excuse for letting things go and ending up next spring and summer with more than your fair share of grey, dull, flaky, dimpled and wobbly bits.

Left unchecked, months of huddling indoors with the central heating on, eating lovely, warm, stodgy comfort foods may leave you with a nasty shock when the covers come off as the temperature starts to creep up.

Poor diet and a lifestyle which leaves you exposed to stress, pollutants and high levels of free radicals will soon show up in your skin. So if you want to peel back the layers next

Aim for at least
five portions of
fresh fruit and
vegetables a day



Body works

Memories of a long hot summer are fading as fast as our suntans, real or fake, and soon we'll be hiding under layers of winter woollies. But that doesn't mean we should let up on body maintenance, says **Lesley Keen**

summer to reveal a healthy-looking body with clear, fresh, firm skin, you'll need to go on a five-step body maintenance course:

STEP 1 Diet and detox

While few people actually crave a salad when the day is dull and chilly and the rain is bucketing down, there's no need to take the comforting, calorie-laden option every day.

Keeping to a sensible diet will help stop the winter pounds from piling on, so aim for at least five portions of fresh fruit and vegetables each day, try to cut down on saturated fats and make junk food and puddings an occasional treat. Continue to drink plenty of water to help flush toxins from your system and keep your skin looking clear and healthy.

Christmas is a time when good intentions fly out of the window, but try to remain aware

of what you are eating – and how much. Parties are a diet menace, with bowls of high-fat snacks waiting to be nibbled and tables groaning with moreish mouthfuls. While you chat, you absentmindedly have another drink, another little plateful of nibbles – and before you know it, you've consumed a couple of days' worth of calories and still have room for a square meal! Keep a mental note of how many times you refill your plate and you'll be horrified at how much you can eat.

Keep an eye on the booze, too. It's not just a case of drinking and driving, alcoholic drinks are heavy on calories – an average glass of vodka or gin contains 55 calories, a glass of red or dry white wine has 85 and if you are pushing the boat out with the bubbly, that's a whopping 95 calories per glass. So if you are in for a long evening, make every other drink

a low-calorie soft one. If you find that good diet resolutions are slipping, detox products and special supplements will give your body a spring clean or help improve skin from inside.

The results of a poor diet can show up in the form of tiredness, headaches, digestive problems, swollen legs, bodily stiffness and even allergy-type symptoms. And when too much water is retained, we feel bloated and heavy and may notice more cellulite.

Products to try:

● **BioFirm** – a herbal detoxification and firming programme from New Nordic. The ingredients are included for their stimulant, firming, fluid reducing and antiseptic qualities and their beneficial effect on the micro flora. Two tablets should be taken twice a day with a glass of mineral water. The course should be followed for a mini-

beauty counter

It's a tough job...

Lesley Keen reports on some of the best products she has tried in recent weeks

While I was researching our bodycare feature it was a good chance to try out some new and less familiar products.

I tried BioFirm, the Danish Detox Programme from New Nordic. This two-week programme based on herbs involves taking two tablets three times a day with a large glass of mineral water. As predicted, I felt lighter and had more energy and though, sadly, I did not lose a great deal of weight, my skin improved.

I also tried Karin Herzog Silhouette Cream and Le Femme Fenjal Anti-Cellulite Perfect Body Gel. I used one product on one thigh and one on the other and compared results. Both improved the texture of my skin. I also lost a small amount from each thigh - Silhouette producing a 1.5cm loss and the Fenjal product 1cm.

I liked VITACE Environmental Shield Hand & Body Lotion from Cosmeceuticals, a creamy, easily absorbed lotion with antioxidants, aloe vera, sunscreens and hydrating hyaluronic acid. It leaves skin feeling nourished and protected.

I was suffering a rare skin reaction to a ring when the Sangre de Drago Cream arrived. The extract of the dragon's blood tree is used by the Andean Indians for its wound healing, antibacterial and antiseptic properties. The cream soothed and healed the allergic reaction in record time. It is also calming a scar from minor surgery on my arm.



I met the people from Manicare and took a closer look at their extensive range of cosmetic and nail products. I was particularly impressed with the make-up brushes, including retractable lip and powder brushes in smart brushed metal cases and the lovely dumpy little bronzer brush. As for the Triple XXX Tweezers with gold-plated tips, they were very effective.

The Pop Chic collection of autumn/winter colours from Bourjois (*above*) takes a neutral palette and splices it up with red accents. I loved the Very Vernis Rose Lounge polish, Beige Eternel lipstick and the trio of eye shadows from cream to taupe.

Last, but not least, there's Nivea Visage Age Reversal Intense Rejuvenating Cream, which claims to make skin look younger in four weeks. It is quickly absorbed and although I am not crazy about the scent, it is far from unpleasant - if it works a minor miracle on those lines and wrinkles I can live with it!

FABULOUS FREEBIE!

If you feel the urge to stop time in its tracks, Nivea is offering 10 packs of Age Reversal for readers of *Over The Counter* to try. Send your name, address and the name of the pharmacy where you work to: *Over The Counter*/Nivea Age Reversal, Sovereign House, Sovereign Way Tonbridge, Kent TN9 1RW to arrive by October 31. The first 10 names drawn will receive a pack of Nivea Visage Age Reversal Intense Rejuvenating Cream worth £14.99.

Nivea turns back time

NEW! Nivea Visage Age Reversal Turn Back The Clock Day Cream 50ml £14.99. Nivea Visage Age Reversal Turn Back The Clock Night Cream 50ml £14.99.

AS SKIN ages, so the epidermis, a layer of cells between the dermis and the epidermis, becomes thicker and less sensitive. It is said that this is why Nivea Age Reversal cream is a 'light' moisturiser that is quick-absorbing, which reactivates the skin's own structuring proteins by stimulating collagen production as the epidermis thickens.

Turn Back The Clock Day Cream contains a unique blend of active ingredients including:

the hydrolysed collagen, Vitamin C, Vitamin E, Hyaluronic Acid and Ceramide 30-49 claiming to visibly reduce wrinkles, improve skin firmness and give intensive moisturising.

The product has taken several years to develop as it was vital to stabilise the Vitamin C.

As Vitamin C is sensitive to oxygen and light, the cream is packed in a protective air-tight tri-aluminate tube. Price (40ml) £14.99.

BioControl UK Ltd
Tel: 0121 329 8800.



briefs

Simply essential

Simple is extending its Oil Control range with Essential No-Shine (15ml, £4.69) to absorb grease from the T-zone. The gel can be applied under or over make-up. Active ingredients include zinc and a natural antibacterial.

Accantia Health & Beauty
Tel: 0121 327 4750.

Firming trio

New from Givenchy are three products offering anti-wrinkle and firming properties. No Surgetic Lotion (£21.00) prepares the skin for anti-wrinkle products; Firm Profile Lotion (£21.00) provides immediate firming effect and Firm Profile Express (£29.00) is a dual action cream mask to firm and drain, restoring facial tone.

Parfums Givenchy Ltd
Tel: 020 7563 8800.

Lavender facelift

Yardley English Lavender range has been repackaged with a more modern look. The range combines bath and bodycare products and a selection of home fragrance products. Retail prices are from £2.25 to £24.95.

Yardley of London Ltd,
Tel: 020 7297 5000.

OC8 wipes away excess oil



Adams Healthcare has expanded the OC8 brand with OC8 Cleanse and Tone Wipes for people with oily or shiny skin.

The wipes are fast-working, long-lasting, non-comedogenic and are used without water.

The company recommends using them in conjunction with OC8 Oil Control Genius, which contains micro-particles to absorb excess sebum for up to eight hours.

OC8 Cleanse and Tone Wipes have a refreshing fragrance and are presented in packs of 25 (£4.49).

Adams Healthcare,
Tel: 0113 232 2483.

Constipation

Constipation is one of those health taboos that people do not like to talk about, let alone ask for advice, yet it affects one in five of the population – that's nine million adults – at any one time

A person can be described as constipated when they pass dry, hard stools less often than normal. What is "normal" varies between individuals but a general rule of thumb suggests that anything less than three times a week can indicate a problem. When constipation strikes it can be extremely uncomfortable. The symptoms can include abdominal pain and distension, nausea, flatulence, a bloated or sluggish feeling, and delay when attempting to open the bowel or between movements. There may also be a dull pain, either persistent or when opening the bowel.

What causes constipation?

The causes are many, but include:

- Ignoring the urge to go to the toilet (maybe out of necessity, eg when travelling)
- A poor diet with low levels of fibre, or insufficient fluid intake
- A change in eating habits
- Lack of exercise
- Medicines such as codeine which slow bowel movement

Some people are more susceptible to the condition than others, such as the elderly, children and pregnant women (always refer people from these last two groups to your pharmacist).

How to treat ...

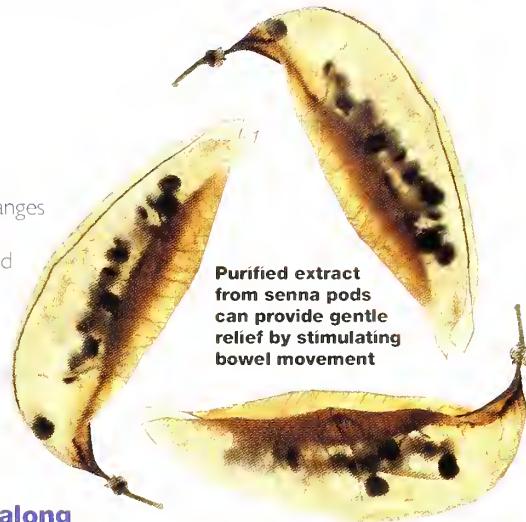
Lifestyle advice is vital in managing constipation and diet should be mentioned alongside any products you

might recommend. Dietary changes – more fruit and veg, and less refined carbohydrate (cakes and pastries) – will help achieve more normal bowel behaviour. Dietary fibre intake can be increased by eating more wholemeal and wholegrain starchy foods. Regular exercise and adequate fluid intake will also help.

To help move things along

If all else fails, there are four main types of laxative. **Stimulant laxatives** such as senna and bisacodyl stimulate bowel movement (peristalsis). They are best recommended for infrequent or short term relief. Bowel movement can be expected with 8-12 hours of taking the medication. Watch out for customers who regularly ask for medicines containing such ingredients as chronic use is associated with tolerance.

Osmotic laxatives, such as lactulose, are generally prescribed by a doctor. They act by retaining fluid in the bowel through osmosis, which helps bowel evacuation. **Faecal softeners** work by



softening impacted stools and promoting bowel movements. Glycerol suppositories or products containing docusate sodium are examples of these types of laxatives.

Bulk-forming laxatives relieve constipation by increasing faecal mass and stimulating bowel movement. They are often used by people who have a colostomy or who suffer from irritable bowel syndrome. Bran, ispaghula, methylcellulose and sterculia are all bulk-forming laxatives. It is important to take products containing these ingredients with plenty of water, and they should not be taken before going to bed.

Refer customers with the following symptoms:

- Abdominal pain
- Duration of more than 14 days without improvement
- Older people with new symptoms
- Long-term laxative use

- Constipation and not passing wind
- Alternating constipation and diarrhoea
- Rectal bleeding
- Vomiting

Promotion

Ex-Lax: the gentle solution



EX-LAX® SENNA CHOCOLATE AND SENNA PILLS

Presentation: Chewable tablets containing 25 mg Sennosides 60% USP (equivalent to 15 mg Sennosides) and coated tablets containing 20 mg Sennosides 60% (equivalent to 12 mg Sennosides).

Indications: For the relief of occasional constipation. **Dosage and administration:** Chocolate tablets: Adults and children over 12 years: 1 tablet; Children 6–12 years: 1/2 a tablet. Not recommended for children under 6 years. The tablets are ideally taken at bedtime. Pills: Adults and children over 12 years: 1

Ex-Lax is a trusted brand with almost 100 years of heritage in effectively tackling the problem of constipation. It was established in 1906, and has been brought right up to date with the introduction of Ex-Lax Senna Pills last autumn.

Based on highly purified senna extract, both products in the Ex-Lax range provide gentle and effective relief in convenient formats to suit sufferers' differing needs. Senna is perceived by consumers to be the most effective stimulant laxative due to its natural properties (it is derived from senna pods).

Ex-Lax Senna Chocolate is the only chocolate tablet laxative on the market. Why chocolate? Because it masks the taste and odour associated with some

pills. A single dose to bring overnight relief and help the body return to regularity.

Ex-Lax Senna Pills are the only sugar-coated senna pills on the market, and have no odour or associated taste. With a smart modern format, they are also the smallest, making them discrete and easy to take. A single dose can bring overnight relief and help the body return to regularity.

Ex-Lax has the second highest brand recognition in the market. It is also one of the UK's fastest growing laxative brands, demonstrating double digit growth. The total market for laxatives is now worth £42.1 million and growing at a substantial rate of 9.5 per cent. The pharmacy sector accounts for 80.8 per cent of total laxative sales (IRI May 2003).

tablets. A second dose may be taken during the day if required. Do not exceed two doses in 24 hours. Not recommended for children under 12.

Contraindications: Intestinal obstruction, bleeding or persistent abdominal symptoms, ileostomy or colostomy.

Precautions: Prolonged use is not recommended. Should not be used for more than 7 days without medical advice. Medical attention should be sought if there is persistent abdominal pain, a laxative is needed every day, or there is no bowel movement after 3 days' use. Adequate fluid intake should be maintained. Caution

shortly after bowel surgery.

Side Effects: Temporary mild griping may occur.

Legal category: GSL

PL number and recommended Retail price: Ex-Lax

Chocolate PL 0030/0131 12s £1.99 24s £2.99 48s £4.85 Ex-Lax Senna Pills PL

0030/0148 20s £2.29

Product Licence Holder: Novartis Consumer Health, Horsham RH12 5AB

Date of preparation: Sept 03



Playing happy families

It's not easy being a parent, with pressure on kids – from the media and from peer groups – affecting almost everything from what they eat to what they wear. Parents are under pressure too as long working hours and trying to 'have it all' can also affect children's health. Consultant pharmacist Mary Allen examines the problem

Currently, many children face one of two eating-related problems, both of which may affect their health for the rest of their lives – obesity and anorexia.

Never before has so much been known about healthy lifestyles and which foods are good for us and which are bad. We all know we should be eating at least five portions of fruit and vegetables every day to ward off a host of illnesses including cancer, heart disease and diabetes...

...and that the wrong kind of fat is bad for us...

...and that exercise is good for our health.

Yet Britain is facing an epidemic of diabetes among children within the next 10 years because of soaring rates of child obesity and lack of exercise.

Specialists warn that poor nutrition in early childhood, together with low levels of physical activity, are creating a generation with health problems on a level not seen before.

The Government is looking at ways of curbing this trend, including:

- finding ways to encourage kids to walk to school
- introducing more sport in school
- looking at the impact of advertising (especially of junk food) on children
- encouraging families to eat five portions of fruit and vegetables each day
- asking supermarkets to open on council estates so fresh food is more accessible.

Obesity is a worldwide epidemic affecting more than a billion people – including an estimated 22 million children under the age of five. The World Heart Federation has warned that, unless the current unhealthy lifestyles change, obesity is likely to overtake smoking as the





biggest cause of heart disease. Obesity also increases the risk of strokes and diabetes, and plays a part in some types of cancer, reproductive problems and other disorders.

Starting young

In the USA, nearly one child in three between the ages of five and 14 is obese, compared with one in six three decades ago. It's now thought that around 20 per cent of children in the UK are overweight. Last year, a paper published in the journal *Archives of Disease in Childhood* detailed four cases of type 2 diabetes, normally associated with adults, occurring in adolescents between 13 and 15, all very overweight. Reports this year suggest that this figure has increased to 100 and by the year 2020, thousands of teenagers are expected to have developed the condition.

Type 2 diabetes differs from type 1 (also known as insulin-dependent diabetes) which usually arises in childhood or early adulthood and is thought to be caused through destruction of cells in the pancreas where insulin is made. Type 2 diabetes is thought to be due to a reduced response to insulin (insulin resistance). Insulin deals with glucose absorbed from the carbohydrates we eat, moving it into body cells where it is used for energy. In type 2 diabetes this doesn't work so well, resulting in a build-up of glucose in the blood, which causes damage to blood vessels, eyesight and to the kidneys.

What's happening?

Both diet and lack of exercise in children and adolescents are largely to blame. Children play outside less than they used to, instead watching television and playing computer games. Parents are more likely to drive children to school than encourage them to cycle or walk.

Children also consume more sweets, crisps, fizzy drinks and convenience food and eat little fresh fruit – one recent study found that a quarter of children eat sweets and crisps for breakfast.

Experts in diabetes have said the recent cases of childhood type 2 diabetes represent the thin edge of a very large wedge. Affected children have a reduced chance of a natural, happy and healthy life and are likely to be on medication to control their blood sugar for years.

Some obese children are being treated with slimming drugs intended for severely obese adults. Last year, 3,000 prescriptions were issued for children for orlistat (Xenical), a drug reserved for use as a last resort for adults, and doctors are now seeing 15-year-olds who have been obese for more than a decade.

As well as the increased risk of associated illness, obesity can affect children in other ways – fat children often end up as the target of jokes and are less able to 'join in'. Resulting loss of confidence and self-esteem can make them more solitary.

Making subtle changes

Fewer than 15 per cent of children at secondary school eat school dinners. While packed lunches could provide a healthy option, research suggests that most fail the good health test. The average lunch box contains a fatty ham or cheese sandwich (white bread), a packet of flavoured crisps, a small chocolate bar and a sugary drink. Consider instead a lunch box containing a salmon or tuna and salad sandwich

(wholemeal bread), raw vegetable sticks (carrot, celery or red pepper), some cherry tomatoes, a few grapes, an apple and mineral water or a milk drink. And perhaps some dark chocolate for the occasional treat.

It's much healthier – but if you made that kind of change overnight, many children might reject it, so make changes slowly.

- Start with peanut butter sandwiches on white bread, moving through lean chicken and salad on granary or softgrain bread, and then to salmon salad on wholemeal.
- Change from flavoured crisps to plain, then gradually phase them out.
- Introduce raw vegetables gradually.
- Replace chocolate with nut bars, which contain sugar but are more nutritious, and gradually introduce small packets of nuts instead, or occasionally some dark chocolate (low in sugar and rich in flavonoids).
- Replace fizzy or sugary drinks with freshly squeezed fruit juice, then move to smoothies which usually contain pulped fruit (more fibre), and eventually to mineral water.

And always welcome anything which encourages regular exercise.

Diet Lack of exercise

What about vitamins?

Provided a child is eating a balanced diet, there should be no need for extra vitamins. However, for fussy eaters, or after illness, a daily children's multivitamin will help ensure some essential nutrients aren't missed. But remember that multivitamins are not a substitute for a good diet.

Too little

While lots of kids are getting fatter, anorexia is also on the increase – and the age of sufferers is dropping at an alarming rate. In an Australian study reported recently, doctors were treating nine-year-olds – and, in one case, a child of four.

Worldwide, one in 250 teenage girls is thought to suffer from anorexia at some point and the average age of sufferers has dropped from over 14 to around 12



Preventing obesity in your child

Lifestyle changes to prevent and treat obesity and related illness are important for both adults and children, and include changes to diet and increased exercise

- ✓ Make sure kids eat a healthy breakfast – before they set off for school
- ✓ Eat together as a family – don't leave kids to eat microwave meals on their own in front of the TV
- ✗ Don't force children to finish what's on their plate if they say they are full, or they may lose the ability to regulate naturally what they eat
- ✓ Wait a few minutes before serving up 'seconds'. There is a time-lag before messages reach the brain to tell us we are full
- ✗ Don't use food (or sweets) as a reward
- ✗ Don't be cross with your child for being fat
- ✗ Don't ban fattening foods – this will only make them more desirable
- ✓ Make subtle changes to lunch boxes
- ✓ Make exercise part of family life
- ✓ Think about abandoning the school run – living within walking distance of school is possibly just as important in choosing a school as its exam result tables.

years. This means anorexia is affecting children before puberty, putting them at risk of permanent physical damage at a critical period of growth, and leading to possible infertility, stunted growth and osteoporosis.

Researchers say that while media images of thin women have some impact on eating disorders in children, there are other reasons too. Anxiety and pressure are often to blame. The study found that high-achieving children from successful, middle-class families were most vulnerable. Some doctors think children develop anorexia as a response to uncertainty in their social environment.

Eating together as a family isn't always an option, but we should try to do it as often as possible and make it an opportunity to share the day's family news, with no pressure. The old saying "the family that eats together stays together" is a good one, and not just for social reasons.

Kids and medicines: Treating the under 12s

Many of your customers will be young mums asking for advice on medicines and childhood illnesses. There is a wide range of medicines available for children and it can be a bit bewildering to work out what's what!

A quick analysis of your shelves will show that most medicines for common childhood ailments contain drugs

from a fairly limited range, so it's important to learn which drugs do what. After that, it's down to which tastes the nice

► **Paracetamol** is probably the mainstay for childhood illnesses. It is a painkiller and also very good at bringing down temperature. It can be used for children over three months old and is good for colds and feverishness, toothache, discomfort, and aches and pains in older children. It is gentle on the stomach, OK for children with asthma (see *ibuprofen below*) and can also be used in babies from two months for post-immunisation fever.

► **Ibuprofen** is available as an OTC medicine for children from six months of age. It is good for pain associated with inflammation – toothache in an older child or muscle sprains and strains. It can affect the stomach, but occasional doses don't usually do any harm. However, it can trigger asthma attacks in susceptible people. Always ask if the child is an asthma sufferer and advise first-time purchasers that if the child becomes wheezy they should stop the medicine and let the doctor know.

Remember that aspirin is NOT suitable for children under 16 – it has been associated with the very rare, but potentially fatal Reye's Syndrome, which results in liver damage leading to possible brain damage, coma and death.

► **Cough medicines** are not usually licensed for children under two years, but a few are. Look at your shelves to see which they are – they generally contain ingredients to soothe tickly throats. From two years of age, there is a wide range of remedies. Those containing guaiacolphenesin are good for chesty coughs, while those containing antihistamines (generally with "drowsiness" warnings) help to dry up mucus which can cause coughing by trickling down the throat. Some contain decongestants like pseudoephedrine, useful for coughs associated with colds (but may cause wakefulness at night). Lastly, cough suppressants such as dextromethorphan are useful for dry tickly coughs.

► **Itching** produced by chickenpox, bites and stings is best treated with an oral antihistamine syrup such as those containing chlorpheniramine or loratadine. Chlorpheniramine can cause drowsiness, which may be a hindrance to children at school, but a blessing for those kept awake by the intense itching of chickenpox. Antihistamine creams aren't generally recommended these days, but aqueous cream and other bland emollients can be very soothing.

► **Headlice** As children get back to school, headlice are bound to become a problem. Check which active ingredient is the current choice and recommend accordingly. Children under six months should be treated with medical supervision.

► **Warts and verrucas** are commonly picked up from communal changing rooms and can take some time to clear up. Before recommending a product, check the age restrictions on the pack.

► **Threadworms** are the most common worm infestation to be dealt with in the pharmacy and are usually treated with products containing piperazine or mebendazole. Check the packs for age restrictions as some are suitable for children over 12 months and some for children over two years.

The first Threadworm Action Day takes place on October 22, to coincide with half term. The day is headed up by Fred Worm, a friendly cartoon character designed to de-stigmatise threadworms. The campaign is being supported by Thornton & Ross, licenced holder for Prispen tablets and sachets.

Remember, most childhood ailments are short-lived, but anyone with persistent or unexplained fever, extreme tiredness, drowsiness, restlessness or other unusual symptoms should be seen by a doctor.



Fight against obesity and anorexia in children with the new *lives* campaign

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Children's products

Huggies promotes active play

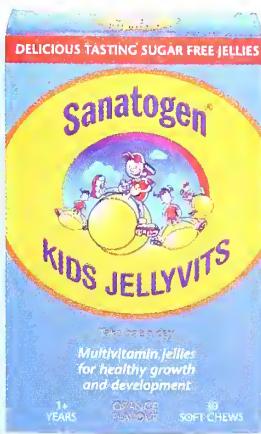
New from Kimberley-Clark, maker of Huggies, is a 'Fit for Fun' booklet to encourage active play among children as young as three months.

It has been produced in the light of concerns that children are becoming less active and more overweight. Experts say play is essential in developing thinking, moving, communication, social and imitation skills and encouraging enjoyment of physical activity.

The booklet has tips to make playtime more active as well as a guide for outdoor activities.

Copies are available by sending a stamped (34p) addressed A4 envelope to: Huggies Fit for Fun Campaign, 28 Viewfield Terrace, Dunfermline KY12 7HZ.

Kimberley-Clark Ltd,
Tel: 01732 594000.



Plus points for Tixy

New Tixyplus has been developed to fill a gap in the Tixy range - the combined treatment of cold, pain and fever.

Tixyplus (100ml £3.49), is a raspberry and vanilla-flavoured dual-action product for the effective relief from the symptoms of colds and flu in children aged two to 12 years, with diphenhydramine hydrochloride to dry up runny noses and paracetamol

to help reduce pain and temperature.

A national print advertising campaign will run through the cough and cold season and Tixyplus will be linking with Bounty to participate in toddler packs, the Pharmacy of the Year competition and midwife and health visitor training.

**Novartis Consumer Health,
Tel: 01403 210211.**



Promotion

Tixyplus – a new addition to the Tixy family

First launched over 40 years ago the Tixylix brand has a tried and trusted reputation amongst pharmacists and parents. Specially made for children, Tixy is now the number one OTC children's cough brand with a 52% share of the market!

With a range of products to suit all needs for children's cough and colds - Tixylix Baby Syrup, Tixylix Daytime, Tixylix Night-Time, Tixylix Chesty Cough, Tixylix Cough and Cold, Tixycolds Syrup and Tixycolds Cold & Allergy Nasal Drops - Novartis Consumer Health has launched a new addition to the Tixy family: Tixyplus Active Relief for Colds + Flu.

Expanding the range

Tixyplus has been developed to fill a specific gap in the Tixy range - the combined treatment of cold, pain and fever. Available as a 100ml oral suspension, Tixyplus is a dual action product for the effective relief of the symptoms of colds and flu in children aged two to twelve years. With a pleasant-tasting raspberry and vanilla flavour, Tixyplus contains diphenhydramine hydrochloride to dry up runny noses, so aiding restful sleep, and

paracetamol to help reduce pain and temperature. Tixyplus has an RSP of £3.49.

The packaging design, featuring a mother cuddling her child and descriptor: "soothes pain and reduces temperature, dries and clears runny noses and so helps restful sleep" has been developed to create strong on shelf stand-out as well as continuity with the rest of the Tixy range.

Getting the message across

Tixyplus will also be linking up with Bounty to participate in their toddler packs, running the ever-popular Pharmacy of the Year competition, running a Midwife and Health Visitor training program and sponsoring key sections of the Autumn/Winter edition of the Mother & Baby Guide to Health, published in September. Consumer advertisements will feature two 'Blues Brothers' boys - one clearly under six and the other over six - standing in front of a brick wall with the tag line: "Now Tixy gets tough on colds and flu".

Scott Waugh, Tixylix brand manager explains: "As market leaders in this category and with over 40 years of experience in the field, we know that



today's parents are concerned about treating their children when they are ill, especially if they have multiple symptoms.

"Our research suggests that a dual action remedy which will effectively but gently help relieve the main symptoms of colds and flu would be welcome. Parents want a truly pleasant-tasting product which their children will take with minimum fuss, and they are much more comfortable with the brands they know and trust. We believe that Tixyplus will meet all of these criteria and will prove a truly relevant and successful extension to the already popular Tixylix range and will drive growth in the category."

1 Tixylix has 51.7% (source IRI June 23, 2003) of the children's cough market

Brand focus



Children's products

Test your knowledge

Win a bottle of champagne with Over The Counter

Check out what you have learned in our children's feature and you could win a bottle of bubbly. Just tick the correct answers to the questions below, fill in your details and send off the form. The first correct form out of the hat on the closing date of October 31 will be the winner.

1 What percentage of children in the UK are thought to be overweight?
a 10 per cent b 15 per cent c 20 per cent

2 How many children were recently found to eat sweets and crisps for breakfast?
a five per cent b 15 per cent c 25 per cent

3 To help children reach and maintain a healthy weight parents should help them change their:
a diet b the exercise they carry out
c time spent on homework

4 How many teenage girls are thought to suffer from anorexia worldwide?
a one in 150 b one in 250 c one in 500

5 The OTC mainstay for illnesses in children under 12 is:
a aspirin b paracetamol c ibuprofen

Name _____

Pharmacy _____

Address _____

SEND YOUR ENTRY TO: Test Your Knowledge, Over The Counter/Child Health, Sovereign House, Sovereign Way, Tonbridge, Kent TN9 1RW



Double action Brulidine

Brulidine Cream is a multipurpose healing ointment for all the family.

Maker Manx Healthcare says:

"Trusted over the years for all-round protection, Brulidine Cream, with its unique formulation is effective, versatile and dependable."

The cream has antiseptic and antibacterial properties, so it can be used to help heal a variety of skin problems including nappy rash, cuts, grazes, burns, scalds and inflammation.

Brulidine retails at £2.25 for a 25g tube.

Manx Healthcare Ltd, Tel: 01926 461628.



A Chewy return to TV

Bassett's Soft & Chewy Vitamins are back on TV next month with a sunny approach to boosting sales. The ads, to be featured on GMTV, feature a happy, healthy family bouncing on a trampoline to the tune 'The sun has got his hat on.' The Bassett's Soft & Chewy range includes Multivitamins in blackcurrant flavour with nine essential vitamins and Vitamin C with 120mg of vitamin C (both for adults and children over six years); Multivitamins with Minerals (adults and children 12 years and over); and Vitamins A, C, D, and E in orange and strawberry variants (children three years and over).

Ernest Jackson & Co Ltd, Tel: 01363 636000.



Bazuka for verrucas

It is estimated that 10 per cent of people suffer from warts or verrucas at some point – with the virus which causes them easily spread through physical contact.

Most cross-infection takes place at swimming pools, in changing rooms or the school gym, making children particularly susceptible to verrucas.

Bazuka Gel (£4.95) and its Extra Strength variant (£5.75) contain salicylic acid and lactic acid. The once-daily application dries to form a water-resistant, protective barrier with no need for plasters.

Dendron Ltd, Tel: 01923 229251.



Priksen's double whammy

Double-dose Priksen offers a complete family treatment for threadworms.

The range include a two-dose powder (Priksen Piperazine Phosphate Powder) for children one year old, a two-dose chewable tablet (Priksen Mebandazole Tab) and a family pack.

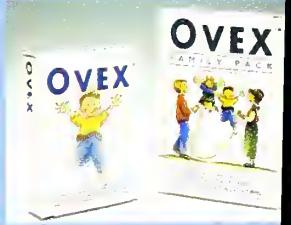
Product manager Sarah Plat says: "The first dose of Priksen treats the adult threadworms. The second dose, taken 14 days later, treats the young worms which hatched from earlier eggs, which breaks the threadworm's lifecycle.

Priksen Powder retails at £2. Tablets are £1.99 for two or £5 for a family pack of eight.

Thornton & Ross, Tel: 01484 842217.



Break threadworm cycle with Ovex



Because threadworms are so infectious, the whole family should be treated when one person is infected and Ovex offers a single dose tablet available as a family pack retailing at £5.99.

Ovex contains mebendazole which kills the worms by blocking the way they absorb glucose in the intestines.

A free Ovex consumer leaflet helps parents understand the condition is available by sending an SAE to Child Hygiene, 150 Falcon Road, Battersea, London SW11 2LW.

Johnson & Johnson MSD Consumer Pharmaceuticals, Tel: 01494 450778.

Fungal facts

While there should be no shame attached to an attack of thrush or athlete's foot, neither is there any reason to pass either infection on to others, says **Jeremy Clitheroe**, MBW, FPharmS

The two highest profile fungal infections which affect the community are thrush and athlete's foot. If a customer is a temporary host to one of these predatory moulds, the first person who should always be told is the sufferer's partner – and there are ways of achieving this without suffering indignities or recriminations. Suggest to your customer that he/she takes one of your explanatory leaflets home, and leaves it out where it will be picked up and read.

If you don't have any leaflets to hand, get in touch with the manufacturers of the various products which cure the conditions, and ask for some (a handy list of manufacturers is in the front of the *C&D Pricelist*).

Thrush is caused by an overgrowth of the yeast-like organism *candida albicans*. The old-fashioned name for this organism is monilia, but it is rarely used nowadays. The *candida* organism is a spherical to oval cell which reproduces by elongating and budding. Under favourable conditions – namely warmth, damp and sufficient nutrients – the moulds thrive. However, under adverse conditions the filaments do not develop and some of the single cells enlarge and form dormant, thick-walled spores.

Pathogenicity and virulence

A pathogen is defined as anything which has the ability to cause disease and its virulence is the degree to which it does it. *Candida* is classified as only a mildly virulent pathogen in a healthy individual. It produces only a superficial infection of the skin (cutaneous candidiasis) and mucous membranes (thrush of the mouth and vagina) in the normal patient, but it can be life-threatening for those with a compromised immune system, such as those on long-term oral steroids for rheumatoid arthritis or patients with HIV infections.

Candidal skin infections are helped by long exposure to damp and also existing skin lesions, which is, for example, why nappies should not be left on for prolonged periods. Armpits, groins and under the breasts are also areas at risk because of their damp, warm localised skinfolds. Obesity and lack of movement do not help either.

An infection with *candida* may develop as a result of being in the wrong place at the wrong time because the

candida organisms are everywhere. They are natural inhabitants of the mouth, nose, throat, intestine, vagina and surface skin but their numbers are kept in check by the body's natural defences. When that defence is breached, or the

Thrush is caused by an **overgrowth** of *candida*

bodily environment changes significantly, these airborne yeasts and pores proliferate.

Even a natural change such as in pre-menstruation, pregnancy or following the use of certain 'hygienic' products, a long course of antibiotics, or the contraceptive pill may be enough to change the environment from hostile to favourable. And do bear in mind that sexual contact with an infected partner is not the most common cause of vaginal thrush.

Symptoms

Oral thrush is very common in infants. It presents as a creamy white spot, or as separate patches, which appear to 'sit' on red raw inflamed areas of the mouth. The pain makes the baby cry and reluctant to feed or drink, so be aware of the dangers of dehydration in babies under 12 months old.

Vaginal thrush presents as a creamy white discharge, similar in appearance to cottage cheese, but with no discernable pus or odour present. The absence of these two signs is the first difference to note between candida and a more potentially dangerous infection with organisms such as the gonorrhoea bacterium or trichomonas.

However, the patient with vaginal thrush will complain about the discharge and the intense itching. She is bound to have been scratching during sleep and have made the area red, swollen and sore. For the male partner, the end of the affected part will become red and irritated. The medical term for his condition is balanitis.

Oral thrush is traditionally treated by using nystatin ▶

Test your knowledge
Sponsored by

see page 29

oral drops, which are only available via the GP or, if you are lucky, via the local walk-in centre where a patient group directions scheme is operating.

There is also another, newer therapy which uses a topical antifungal gel, but this can be difficult to apply to a fractious youngster with a sore mouth. Either way, the best we can do is to advise on oral hygiene measures, fluid intake and refer, quickly. Patients often ask if the baby's oral thrush infection can be passed on to the rest of the family and if it will "go right through him". The answer to the first question is, if the rest of the family are all healthy, no; and to the latter, no again, because nystatin is poorly absorbed by the intestine and will therefore be present in therapeutic concentrations at the 'lower end' of the alimentary tract.

Vaginal thrush treatments have been revolutionised by

the advent of the OTC one-dose oral treatment and the marketing and advertising teams for these products have done their job exceptionally well.

Few patients who have experienced the condition will not remember the high impact TV and other media adverts. Going OTC has largely shifted the market from prescription-only to self purchase. Having said that, the mainstay of treatment via antifungal creams and pessaries are still extensively used and recommended. Pessaries are reasonably convenient to use and very effective, but, unless used exactly as instructed in the manufacturer's leaflet, do not always have the same long-term effectiveness as the one-dose capsule.

The unique selling points of the one-dose oral product are in its single dose presentation and the fact that its

formulation delivers medication to the affected area by bath it in a therapeutically effective concentration of the antifungal – via the patient's blood stream. Creams are less convenient to use and apply, but have the

Athlete's foot is present in approximately 15 per cent of the population at any one time



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Counselling points

- There's no shame in having a fungal infection, but don't share it!
- Tell your partner.
- Think cure and prevention.
- Oral thrush – finish the course.
- Breastfeeding mums may need an antifungal cream for the nipples – ask the GP first.
- If the baby won't feed, it's probably not drinking either.
- Dehydration in under one-year-olds can be a killer in 24 hours – see the GP.
- Vaginal thrush – wash area in clear water only and avoid perfumed soaps, deodorants etc.
- Wear loose cotton underclothes, and none if possible during treatment.
- Read the treatment instruction leaflets carefully.
- Athlete's foot – remove the wet/warm/infected factors.
- Keep between the toes dry.
- Don't share shoes or socks.
- Think about reservoirs of infection.
- Wear sports socks inside trainers and wash them frequently.
- If you suffer recurrent infections, think about the trainers themselves.
- Affected children need not be kept off school, but don't let them walk around barefoot until all is well. NB to advise the teacher too.

added bonus of being unisex.

Historically, natural yoghurt was used as a treatment for vaginal thrush – and it works. The yoghurt replaces the depleted, naturally occurring, 'friendly' bacterial organisms in the vagina and thereby overcomes the invading fungi.

Athlete's foot

Athlete's foot is the other high profile fungal infection – this time the ringworm organism, tinea, is the culprit. There are three distinct ringworm genera, all of which are able to invade and digest the keratin in our skin, hair and nails, without invading the underlying tissue. Tinea pedis, the scientific name for athlete's foot, is present in approximately 15 per cent of the population at any one time.

The organism spreads by sprouting extensions which permeate and infect the surface layers of the skin. In response, the basal layer of the skin produces more epidermal cells than normal, giving rise to the characteristic thickened layering of untreated infections with athlete's foot. As the horny layers are shed, they contaminate the floor, socks, footwear etc with infected fragments, all of which are potentially viable and that is why athlete's foot so easily transmitted to others.

After the event, the source is often quite obvious. We know those strands and spores of the tinea fungi are everywhere, but they are most concentrated and thrive in damp, moist conditions such as communal sports changing rooms, showers and in sports clothing, footwear and hosiery. Like candida, a broken skin surface is the point of entry for the spores, but the filaments can invade quite effectively, just by contact.

Athlete's foot presents as itchy webs between the toes, usually starting between the fourth and little toes, and spreading to affect all the interdigital webs (the space between the toes).

If left untreated the infection may affect the arch and later, the ball of the foot and in the worst cases the webbing split open and bleed. The water blisters which form on the sole of the foot are often broken by the time the patient notices them and may disguise the condition, but a quick look between the toes will reveal the true problem.

The sufferer will complain of a persistent itch and soggy skin between the toes, which peels off like wet blotting paper. Scratching is irresistible, but it predisposes the sufferer to nailbed infections.

The old adage 'remove the cause' has a great deal to be said for it. Remove the damp, warm conditions and the infection cannot survive. This is one major reason why athlete's foot patients are so much better in the summer. They wear sandals and open shoes, unlike the synthetic socks and waterproof occlusive shoes of winter.

Test your knowledge

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By the time we see patients, they are probably well infected and will already have tried several remedies. Most treatment failures may be attributed to stopping the treatment too early or to re-infection.

The treatment of choice is one of the modern imidazole family of antifungal creams. You can recognise them because their active ingredient will end with -azole. Stress to patients that the treatment period is often three to four weeks, and should be continued even though the symptoms may have disappeared during the first week. ©

Fungal products



The new Care Flucanazole single-dose capsule offers relief from the symptoms of vaginal thrush within 24 hours for most sufferers.

Thornton & Ross says that, at a recommended retail price of £6.99, the capsule will appeal to those who want effectiveness "at a sensible price".

The launch is backed by a campaign in women's magazines, a pharmasite promotion and leaflets. Care Flucanazole extends the Care women's health range, which already offers Clotrimazole cream and Cystitis Relief.

Thornton & Ross,
Tel: 01484 848200.



Daktarin tackles the problem of compliance in athlete's foot treatment with Daktarin Gold, to treat the condition between the toes in just one week. Daktarin Gold is the first Pharmacy antifungal cream to contain ketocanazole. It retails at £4.99 for 15mg. Daktarin Dual Action Spray Powder (100g, £3.99) with miconazole nitrate, helps prevent reinfection.

Johnson & Johnson MSD Consumer Pharmaceuticals, Tel: 01494 450778.

Canesten AF Once Daily offers a 90 per cent cure rate for athlete's foot with just one application per day.

The P-licensed product contains bifonazole, which is water resistant, making it especially useful for sporty sufferers.

AF Once Daily is also useful on holiday, when feet are hot and sweaty or people are in and out of the water – ideal conditions for the infection to thrive.



STAMP OUT ATHLETE'S FOOT
Mycota
CREAM AND POWDER

**Distributor: Laser Healthcare,
Tel: 01202 780558.**

Test your knowledge

Win a bottle of champagne with Over The Counter

Check out what you learned in our fungal feature and you could win a bottle of bubbly. Just tick the correct answers to the questions below, fill in your details and send off the form. The first correct form out of the hat on the closing date of October 31 will be the winner.

1 Which of the following conditions is ideal for the development of the candida organism?

- a** warm **b** dry **c** damp

2 Which patients may be at serious risk if they are infected?

- a** those with HIV infections **b** those with a history of fungal infections **c** school children

3 Vaginal thrush treatments include which of the following?

- a** single-dose oral treatments **b** pessaries **c** creams

4 The organism which causes athlete's foot is related to:

- a** psoriasis **b** dermatitis **c** ringworm

5 When treating athlete's foot it is important to:

- a** complete the course of treatment **b** take extra exercise **c** avoid exercise

Name _____

Pharmacy _____

Address _____

Send your entry to: Test Your Knowledge, Over The Counter/Fungal Infections, Sovereign House, Sovereign Way, Tonbridge, Kent TN9 1RW



Lamisil^{AT} has produced a poster in association with the Society of Chiropodists and Podiatrists, designed to help sufferers recognise the symptoms of athlete's foot.



The poster focuses on visualising the most common symptoms – itching, burning and painful stinging.

Lamisil^{AT} is distributing posters during the key season for the infection. It is also extending its association with the Society of Chiropodists and Podiatrists to find out the state of the nation's feet via a questionnaire on the website www.feetforlife.org.

**Novartis Consumer Health Ltd,
Tel: 01403 210211.**

Out in the cold

There's little or nothing the GP can offer the majority of cold and 'flu sufferers, which makes the pharmacy the first port of call for those desperate to alleviate the symptoms. **Sarah Purcell** looks at the anatomy of colds and 'flu – and the latest innovations in the market

If you manage to get through winter without a cold or 'flu, count yourself lucky. Most adults catch two to four colds a year, while children suffer up to 10, says professor Ronald Eccles, of the Common Cold Unit at Cardiff University.

"In the UK we catch some 120 million colds every year, and that's a conservative estimate. We do seem to be getting more colds, partly because our cities are becoming more crowded but also because people travel so much more in their daily lives and viruses can spread more quickly," he says.

Up to 15 per cent of the population will succumb to influenza in any given year, according to the Department of Health. And the virus causes 3,000-4,000 deaths per year when 'flu incidence is low and up to 13,000 in epidemic years.

"In a typical year some 430,000 cases of 'flu are reported to GPs but, of course, the real number is much higher than that," says Dr Douglas Fleming, of the Flu Monitoring Unit at the Birmingham Research Unit.

The pharmacy remains the first port of call for patients with colds and 'flu and there's plenty you can offer in terms of advice on prevention as well as the best remedies to relieve symptoms.

Catching a cold

We're all more at risk of catching a cold during the winter months, and it's not just because we spend more time huddled together indoors.

Professor Eccles believes the colder weather plays a role

too: "Our noses are never protected from the cold air and the drop in temperature in the nose lining slows down the clearance of mucus, so any viruses inhaled are exposed to the body for longer." The lack of sunlight in winter can have a depressive effect on our mood, and this too can lower our immunity to infection.

When a cold or 'flu virus enters the body, this is what happens:

- the white blood cells try to mop up and destroy the virus
- the virus triggers the production of antibodies, which attach themselves to the virus to destroy it
- the white T-Cells are activated, locking onto any cells that have been taken over by the virus and destroying them

Whether you succumb to 'flu or a cold will depend on the strength of your immunity at that time. It's simply not true that some people are programmed to get more colds than others – it's all down to having a healthy immune system. It's a good idea to boost it before the winter cold season so you're better equipped to fight off viruses. Here's how:

- Keep active. Regular physical activity helps to circulate the white blood cells around the body as well as tone up cardiovascular system. Around 30 minutes a day is ideal, don't overdo it: exerting yourself too much temporarily lowers immunity.
- Keep regular hours. Going to bed at roughly the same time each night will ensure you get enough deep sleep, which is essential for a healthy immune system.
- Garlic is a good immune booster and taking it regularly through the winter can help fight off the bugs.
- Get plenty of vitamins A, C and E. All these antioxidant vitamins will strengthen immunity.

We tend to think of a cold as

Regular physical **exercise** helps circulate
the white blood cells around the body

Are the symptoms like cold or 'flu?

Get customers to ask themselves these questions to find out if it's really 'flu or cold they're suffering from.

1 Do you have a high temperature (ie more than 37°C)?

A temperature of up to 41°C indicates 'flu – with a cold you only get a very slight increase in temperature.

2 Do you have aching joints?

A sudden onset of aching all over is indicative of 'flu, while mild aching, usually just in the legs, is due to a cold.

3 Do you have a severe sore throat, which came on suddenly?

A cold causes a gradual, but mild sore throat, while 'flu causes severe soreness.

4 Can you get out of bed?

'Flu leaves sufferers feeling exhausted, not wanting to eat and unable to carry on with normal activities for up to two weeks or sometimes more. If it's a cold you can normally struggle on.

5 Do you have a severe headache?

'Flu can cause a throbbing headache, but with a cold it's much milder.

6 Are you coughing or sneezing?

A dry cough is a common 'flu symptom, but if you're sneezing or have a runny nose then it's cold, not 'flu.'

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see page 32





Drinking plenty of **fluids** is essential

- hot drinks will help soothe a sore throat too



Test your knowledge

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see page 34



mild infection but for some it can have serious consequences, says professor Eccles. "Asthmatics are likely to see a worsening of symptoms when they catch a cold while in young children repeated colds can lead to glue ear."

In elderly people a cold can turn into bronchitis and babies who pick up an RSV (respiratory syncytial virus) type of cold virus can develop a potentially life-threatening chest infection called bronchiolitis, where breathing is affected.

'Flu alert'

'Flu is a viral infection affecting the respiratory tract. There are three main strains – A, B and C. Type A is the most common and most serious, causing the classic 'flu' symptoms. Type B has similar but milder symptoms, while type C is the mildest, with cold-like symptoms. 'Flu occurs mainly during the winter, usually in outbreaks lasting for six to eight weeks. 'Flu can be very serious and lead to complications including bronchitis and pneumonia, mainly in the elderly or those with impaired immune systems. An annual 'flu vaccination between late September and early November is recommended for those at risk from complications. These include:

- the over 65s
- anyone with a chronic heart complaint
- anyone with a chronic chest complaint, including asthma
- those with chronic kidney disease
- diabetics
- people with a lowered immunity due to a disease or treatment such as chemotherapy
- those who live in an old people's or nursing home.

"There is a feeling that healthcare workers should also be included in this list, but at present there are no changes in the guidelines," says Dr Fleming.

Alternative remedies

The popularity of herbal medicines to ease winter ailments continues to grow, with the complementary medicines market now worth £130 million (*Mintel*). Potter's Herbal Medicines recommends the following to ease winter ills:

For coughs: horehound and hyssop are expectorants to help reduce phlegm.

For colds and sore throats: Elderflower reduces catarrh and peppermint oil is antimicrobial.

For nasal congestion: garlic.

- Echinacea is the most well-proven antiviral herb and is thought to work by increasing the white blood cell count. Take 1-2ml every two to three hours at the onset

SARS update

Some experts are predicting a return of the respiratory infection SARS (severe acute respiratory syndrome) which caused such panic last winter.

"SARS is not going to just disappear and, because we know so little about it, we can't predict how and when it will spread. In Hong Kong it isn't restricted to the winter months so it could appear at any time," says Dr Fleming.

The symptoms are similar to 'flu, so it's

important to refer anyone who may have been in contact with the virus.

SARS symptoms

- High fever (38°C plus)
- Dry cough
- Shortness of breath or breathing difficulties
- Other symptoms can include headache, muscular stiffness and diarrhoea.
- The incubation period is 2-10 days.

To cut the risk of infection, the Public Health Laboratory Service advises that any suspected SARS cases

are first seen at home by a doctor if possible. If they then need referral to hospital, staff can be alerted prior to the patient's arrival.

The majority of SARS patients do make a full recovery, but a few develop pneumonia with breathing difficulties which can be fatal in high-risk patients. A combination of antibiotics and antiviral drugs are used to treat the illness, but the actual cause of the virus remains unknown so there is no specific cure.

of symptoms. Echinacea can be combined with goldenseal root, which has an antimicrobial effect.

- Zinc may reduce the severity and duration of a cold by boosting production of white T-cells. Take 15mg zinc per day to boost immunity or suck a zinc lozenge. ☺

How you can help relieve cold and 'flu' symptoms?

COLDS

Symptom	Recommend
Runny nose	A nasal spray or drops containing a decongestant
Blocked up nose	A decongestant inhalant in the form of drops or capsules used in hot water or inhaled on a tissue; decongestant tablets, nasal sprays or drops
Painful sinuses	A combined analgesic and decongestant tablet; steam inhalation with drops of menthol and eucalyptus oil
Sore throat	Lozenges or pastilles that contain a local anaesthetic; throat spray for more severe sore throats
Dry cough	A cough suppressant liquid for limited use. Any long-term dry cough should be referred to the GP
Chesty cough	An expectorant liquid to help bring up mucus; steam inhalation
Headache	Analgesics

'FLU

Antibiotics won't be prescribed unless the patient has developed a bacterial infection. Analgesics can be taken to relieve headache, sore throat and general aches. Drinking plenty of fluids is essential – hot drinks will help to soothe a sore throat, too. An all-in-one 'flu' remedy should help deal with all the symptoms, but ensure sufferers are not taking other remedies at the same time. The antiviral zanamivir (Relenza) is currently only recommended for the elderly and other high-risk groups, although the National Institute for Clinical Excellence still has it under review. The drug has to be given within 48 hours of the onset of symptoms to be effective.

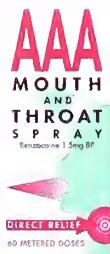
Colds & 'flu products

New size for Medised

SSL International is launching a new 140ml Infant pack size as part of an overall range rationalisation.

The new pack replaces the discontinued Sugar Free, Colour Free and Original 140ml variants and Medised is now available in infant format only - 100ml and 140ml.

SSL International, Tel: 0161 654 3003.



AAA Mouth & Throat Spray is the strongest spray of its type available. Each metered dose delivers Benzocaine 1.5mg directly to the spot for fast and direct relief of pain from sore throats and minor mouth infections.

The local anaesthetic lasts for two to three hours and the spray has a pleasant flavour of clove bud, peppermint and menthol. It

can be used for adults and children over six years.

Manx Healthcare is supporting the AAA Mouth & Throat Spray from October to March with national press activity. Point of sale material is available for independent pharmacies.

**Manx Healthcare,
Tel: 01926 461628.**



Cold – or blocked sinuses?

Pharmacy-only Non-Drowsy Sudafed 12 Hour Relief is clinically proven to relieve the pain of sinus congestion and catarrh. One tablet offers sustained relief over 12 hours and a pack of six retails at £2.99, with 12 at £4.99.

The website – www.coughsandcoldadvice.com – offers an email alert service notifying consumers when their region has a high level of colds and 'flu and includes a guide to winter illnesses.

There is also a consumer booklet, *Knowing Your Nose, A Guide To Nasal Congestion*, available from the Pfizer Consumer Healthcare Advisory Bureau on 02380 628 274.

**Pfizer Consumer Healthcare,
Tel: 023 8064 1400.**

Hotels has the answer

Herbal healthcare specialist Hotels has a range of traditional remedies to defend against common winter health problems, including Hotels One-A-Day Garlic, One-A-Day Neo-Garlic and One-A-Day Rosehip. All contain ingredients well known for their immune boosting properties.

Hotels One-A-Day Garlic is licensed as a medicine for the symptoms of colds and flu and is available in packs of 30 or 90 tablets, retailing at £6.63 and £6.69. Those who want the benefits of garlic without the distinctive smell can choose One-A-Day Neo-Garlic, also in packs of 30 or 90, retailing at £3.45 and £8.75. Both Neo-Garlic and Rosehip contains echinacea to help boost natural blood cell levels and rosehip, a natural source of vitamin C. A pack of 30 tablets costs £3.75.

Seven Seas Healthcare Ltd, Tel: 01482 375234.



Vaporising relief

The new Healthtek Vaporiser is a plug-in device which is designed to ease blocked noses by filling the room with a combination of natural decongestant vapours.

The Vaporiser, from Sea-Band, contains a plug-in unit plus five refill pads, with a blend of eucalyptus, menthol, camphor and other natural oils to relieve blocked noses and throat irritations caused by colds. Each pad lasts 8-10 hours.

Healthtek Vaporiser can be used day or night, as an alternative to or alongside other cold remedies. It retails at £6.49, with six refill pads at £3.99.

Sea-Band, Tel: 01455 639750.



Benylin offers something for all

The Benylin adult range of cough medicines offers six variants including products for chesty and dry coughs (each in original and non-drowsy formulas), cough and congestion and Benylin with Codeine. For children, there are sugar and colour-free medicines for chesty dry or night coughs, coughs and colds.

The range also includes Benylin 4-Flu in liquid and tablet form, a five-day pack of Benylin Day & Night; Benylin Sore Throat lozenges in redcurrant or honey lemon flavours and Benylin Ac Response, with Echinacea and purpurea.

A booklet and two leaflets are available free from the Pfizer Consumer Healthcare Advisory Bureau on 02380 628 274.

**Pfizer Consumer Healthcare
Tel: 023 8064 1400.**

Veno's sorts out coughs

The Veno's range of cough syrups for children aged two to 12 years contains guaiacolol and chlorpheniramine maleate.

The syrup is sugar-free and the recommended dose is a spoonful in a glass of water or milk. Veno's Chesty Cough Syrup (200ml) costs £2.89 for 100ml.

GlaxoSmithKline Consumer Healthcare,
Tel: 020 8041 6700



Big Stan takes to the road

Big Stan, the Covonia bull, is on the road this winter. Thornton & Ross has a specially designed truck featuring Big Stan to transport Covonia "cough medicine with clout" around the UK.

Covonia is the number two cough brand in the UK and the company aims to

fuel sales this season with its biggest ad campaign.

• A 300ml expectorant extends the Covonia range. Containing menthol, squill tincture and liquorice liquid extract, the new product retails at £5.29.

Thornton & Ross,
Tel: 01484 848200.

Robitussin tackles the tickle

New Robitussin Soft Pastilles for Dry Coughs contain dextromethorphan hydrobromide 7.5mg to relieve a dry, tickly cough.

The P licensed pastilles offer a portable and full strength alternative to liquid cough medication or confectionary cough sweets, allowing a full dose throughout the day. Research shows that cough medication is usually only taken morning and evening due to the inconvenience of carrying a bottle.

Two of the chewable, sugar-free, cherry menthol flavour pastilles provide a full adult dose. Adults should take two pastilles three or four times daily and children aged six to 12 should have one pastille three or four times daily. A box of 20 pastilles retails at £3.59.

Wyeth Consumer Healthcare, Tel: 01628 669011.



New name for Ultra Chloraseptic

There is no such thing as a quick fix for sore throats, but top-selling Ultra Chloraseptic – now known as Ultra Chloraseptic Anaesthetic Throat Spray – offers quick relief. The directional spray nozzle delivers the active ingredient straight to the site of pain.

The product has a sugar-free, antiseptic base and is presented in a pocket-sized pack with a protective cap.

Ultra Chloraseptic is being

featured in a 'Spray goodbye to sore throats' ad campaign in women's magazines from October to February. Point of sale material and a new counter display featuring the advertising will be available throughout the season.

Prestige Brands,
Tel: 01753 644478.



New Olbas for little ones

New Olbas for Children is a natural decongestant specially formulated for children from three months to help restore easy breathing with pure plant oils.

During the day, a few drops should be sprinkled on to a handkerchief or tissue, allowing the child to inhale the vapours. At night, the hankie should be placed in the bedroom – inside a pillow for children and out of reach for babies.

Olbas for Children retails at £2.19.

GR Lane Health Products Ltd,
Tel: 01452 524012.

Why SPRAY for sore throat pain?

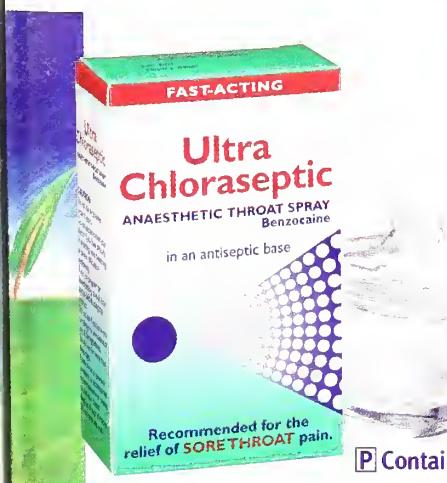
Ultra Chloraseptic Anaesthetic Throat Spray:

- ◀ targets the throat not the mouth
- ◀ works in seconds
- ◀ sugar free, antiseptic base
- ◀ pocket friendly with protective cap

The UK's best selling sore throat spray*

*ACNielsen Pharmacy Audit April 2003, Sore Throat Sprays.
Further information is available from Prestige Brands (UK) Limited, 3 Scotlands Drive, Farnham Common, Slough, Berkshire SL2 3ES.

Contains Benzocaine



Test your knowledge

Sponsored by



Test your knowledge

Win a bottle of champagne with Over The Counter

Check out what you have learned in our colds and 'flu feature and you could win a bottle of bubbly. Just tick the correct answers to the questions below, fill in your details and send off the form. The first correct form out of the hat on the closing date of October 31 will be the winner.

1. How many colds are caught in the UK each year?

a. 60 million b. 120 million c. 240 million

2. Whether or not someone develops a cold depends on:

a. the strength of their immune system at the time
b. the number of colds they are 'programmed' to catch
c. how close they have been to someone with a cold

3. Those for whom a cold can mean serious complications include:

a. asthmatics b. the elderly
c. young children

4. How many main strains of 'flu are there?

a. three b. six c. nine

5. 'Flu vaccinations are best given:

a. any time from August onwards
b. by the end of September
c. between late September and early November

Name _____

Pharmacy _____

Address _____

SEND YOUR ENTRY TO: Test Your Knowledge, Over The Counter/Colds & 'Flu, Sovereign House, Sovereign Way, Tonbridge, Kent TN9 1RW



Colds & 'flu products



Calming coughs with Pavacol-D

Pavacol-D from Ransom Consumer Healthcare is an opioid cough suppressant for the treatment of dry, irritating coughs. The mixture, which contains pholcodine, works by acting on the part of the brain which calms the coughing reflex. The licensed product is sugar free, making it

suitable for children over 3 years. Because the medicine relieves pain in the chest as well as helping to stop coughing, it may also help to relieve the desire to cough. Pavacol-D retails at £2.06 for a 300ml bottle.

Ransom Consumer Healthcare,
Tel: 01462 437 811.



More power to sore throat sales



Easing cold miseries

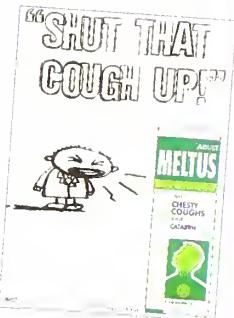
GlaxoSmithKline's Nurses brand - Night Nurse and Day Nurse - is the leading pharmacy-only cold and 'flu brand and the company is introducing a new pack of Day & Night Nurse capsules for round the clock relief from cold symptoms, delivering maximum strength pain relief and cough suppressant. A pack of 24 capsules retails at £4.49. The products are also available individually in liquid or capsule format.

Also growing strongly is Beechams Decongestant Plus, with paracetamol, caffeine and phenylephrine to relieve cold and 'flu symptoms, with particular emphasis on blocked noses and stuffy heads. A pack of 16 capsules retails at £2.79.

GlaxoSmithKline Consumer Healthcare,
Tel: 020 8047 2700.

Meltus puts an end to coughs

Meltus offers a range of adult and junior variants for chesty, dry and night-time coughs. The adult range is formulated with expectorant guaifenesin, antitussive dextromethorphan, decongestant pseudoephedrine and antihistamine diphenhydramine and comprises Expectorant, Expectorant with Decongestant, Dry, Honey & Lemon and Night Time cough medicines. The junior and baby range offers Night-Time, Dry Tickly coughs, Expectorant and Baby Linctus.



SSL International, Tel: 0161 654 3000.

The Beechams range is being extended with Beechams Max Strength Sore Throat Relief Lozenges in lemon and honey or blackberry flavour.

The lozenges contain a combination of anaesthetics and antibacterial actives - hexylresorcinol and benzalkonium chloride - designed to encourage trading up to stronger remedies.

The lozenges retail at £1 for 10 and £2.49 for 20.

Beechams Max Strength Sore Throat Relief will be supported by a £1.5 million advertising campaign during the cold and 'flu season.

- GSK is introducing an eight-tablet pack for Beechams All in One tablets (£2.25) which offer relief from the symptoms of headache, blocked nose, sore throat and chesty cough.

GlaxoSmithKline Consumer Healthcare,
Tel: 020 8047 2700.

Suck it and see with Ernest Jackson

Following the integration of Adams and Cadbury Schweppes earlier this year, the two leading medicated confectionery brands - Halls Soothers and Halls Mentho-Lyptus - are available from Ernest Jackson.

As well as the Halls top sellers, Ernest Jackson also offers Throaties Pastilles, Victory V Lozenges, Potter's Traditional Pastilles and Potter's Catarrh Pastilles. Halls Soothers are in four flavours, Mentho-Lyptus in five and Throaties offers Soothing and Antibacterial ranges, each with two variants.

Ernest Jackson & Co Ltd, Tel: 01363 636100.



Decongestants

Pharmacy FORUM

The link between global warming and the number of people visiting your pharmacy might seem tenuous, but it is a fact that warmer winter temperatures in UK are having an impact on the number of people suffering from colds and nasal congestion

There has been a reduction in patients visiting their GP with flu-like illnesses – less than a fifth visited their GP with such symptoms last winter compared to 1999/2000.

So what? Well, the cold/flu and decongestant market is what the marketing experts call a 'seasonal market'. It is also one that is 'mature'. This means it is linked to the onset of colder weather; and that it is well developed with no new wonder products out there to boost sales. So another warm winter could mean fewer people with colds and congestion, which is not good for sales from the medicines counter.

It means you and your colleagues need to make sure that your pharmacy is in a position to maximise its sales over the winter period. Have you remerchandised your counters and shelves, and adjusted your window displays to reflect the change in the seasons? It is time to relegate the sun tan lotion and hayfever medicines and promote the decongestants and cough medicines.

The art of silent selling

Merchandising your shelves properly is important. It has been described as the art of silent selling. Research shows that:

- 90 per cent of pharmacy sales occur without the help of pharmacy staff

- 40 per cent of buying decisions made on the spot in the pharmacy
- 28 per cent of first time product purchasers see the product on display

To maximise sales from your shop you need to know which products best in each category, and give them shelf space accordingly. You can use planograms from suppliers to help you get the right balance of brands on your shelves, or you can use sales data from your own pharmacy. The marketing experts call this category management. For example, if OTC medicines account for 50 per cent of sales in your pharmacy, then they should get 50 per cent of the shelf space. Breaking that down further, if week-by-week decongestants account for 10 per cent of your OTC sales, they should get 10 per cent of the OTC shelf space, and so on down to brand level.

Customer knowledge

So much for getting the pharmacy looking right. You need to back this up with knowledge of what customers are likely to buy and sound product knowledge. You might find it useful to



know, for example, that in the decongestant sector:

- Oral formats will account for three quarters of your sales
- Topical rubs seem to be becoming less popular
- Some products show much less seasonal demand than others. Otrivine, for example, shows the least seasonal peaks/troughs of all products in the decongestant category. (Source IRI April 2003)
- There is a trend towards 'maximum strength' and 'on the go' remedies.
- Whereas mums will often buy for a whole family, decongestant sprays are 'personal selection' products - the majority of consumers buy for themselves
- While the majority of decongestant users want to clear their nose of a cold, a high proportion also want relief from sinusitis.

Promotion

Otrivine –the expert at relieving nasal congestion



No one knows noses like Otrivine, the expert at relieving nasal congestion. That's why Otrivine is the UK's number one brand in nasal decongestant drops and sprays. Otrivine offers a choice of formats for the effective treatment of nasal congestion, and accounts for the lion's share – 42 per cent – of sales of decongestant drops and sprays. The brand is well recognised by consumers for giving immediate and long lasting relief from nasal congestion.

Otrivine contains xylometazoline, used for the temporary relief of congestion or stuffiness in the nose caused by colds, sinus trouble or hayfever and other allergies. Otrivine drops and sprays help to open up the nasal passages, clear nasal secretions and return swollen blood vessels to their normal size, taking away that 'stuffed up' feeling.

Otrivine is fast acting and will provide effective relief for up to 10 hours. For your customers the message is: "It's hard on congestion, but gentle to you", with no harsh smell or stinging.

The Otrivine winter range

Otrivine Adult Nasal Spray (GSL – Menthol or Original)

- Simple-to-use spray delivering a fine mist to quickly clear congestion

- Available in cooling menthol or original formats for adults and children over 12 years

Otrivine Adult Nasal Drops (GSL)

- Delivered straight to the nasal passage with an enclosed dropper

Otrivine Child Nasal Drops (GSL)

- Special paediatric formula suitable for children from 2 years, and from 3 months with doctor's advice
- Lasts up to 10 hours offering a whole night's rest

Otrivine Adult Measured Dose Sinusitis Spray (GSL)

- Measured dose for nasal congestion associated with sinusitis as well as perennial and allergic rhinitis including hayfever:

- For adults and children over 12 years

OTRIVINE Nasal Sprays and Drops. **Presentation:** Nasal sprays and drops, containing xylometazoline HCl 0.1% w/v (sprays and adult drops) or 0.05% (child nasal drops).

Indications: Symptomatic relief of nasal congestion, perennial and allergic rhinitis (including hay fever), sinusitis. **Usage and Administration:** sprays and adult drops. Adults and elderly: Spray and Menthol Nasal Spray. One application in each nostril 2-3 times daily. Adult Orops: 2-3 drops in each nostril, 2 or 3 times daily. Sprays and Adult Nasal Orops Not suitable for children under 12. Otrivine Child Nasal Drops: Children under 12. One or 2 drops in each nostril 1 to 2 times daily. Doctor's advice needed for infants under 2 years. Not to be used in infants under 3 months. **Contra-indications:** Sensitivity to ingredients. Trans-sphenoidal hypophysectomy or surgery exposing the dura mater. **Precautions:** Do not exceed the recommended dose or use for more than 7 consecutive

days. Use with caution in patients showing a strong reaction to sympathomimetic agents, or with heart or circulatory disease. Advisable not to use in pregnancy. Each pack should be used by one person only to prevent cross-infection. Do not use the bottle for more than 28 days after opening. **Side Effects:** Occasional burning nose and throat, local irritation or dryness of nasal mucosa, nausea, headache. Systemic cardiovascular effects have been reported. Occasional restlessness in small children using Child Nasal Drops. **Legal Category:** GSL. **PL nos. and recommended retail price:** Otrivine Adult Nasal Drops PL 0030/0115 10ml £2.99. Otrivine Adult Nasal Spray PL 0030/0116 10ml £2.99. Otrivine Adult Menthol Nasal Spray PL 0030/0118 10ml £2.99. Otrivine Child Nasal Drops PL 0030/0114 £2.49. **PL Holder:** Novartis Consumer Health, Wimblehurst Road, Horsham, West Sussex RH12 5AB. **Date of Preparation:** August 2003

Popsters Billie Piper and Sir Cliff Richard may be at opposite ends of the age spectrum but they share a common view when it comes to vitamins, minerals and supplements. They, along with thousands of other celebrities, consumers and practitioners, are totally opposed to the European Commission's Food Supplements Directive that comes into effect in the UK on August 1, 2005.

Except in the case of products which are already licensed under the Medicines Act, after this date all but 13 vitamins and 15 minerals (*see box*) will have to disappear from the market. Manufacturers of unlicensed products can only avoid this by reformulating them into an acceptable form or spending upwards of £80,000 submitting to Euro legislators the product safety information necessary to keep them on the market – and then only until January 2010.

The deadline for these submissions is July 12, 2005 but, as *OTC* went to press, only around 20 of the 300 nutrients missing from the UK's 'acceptable' list have followed this route. As opponents of the legislation feared, the cost of assembling and submitting the information is proving too high for the many specialist companies in this market.

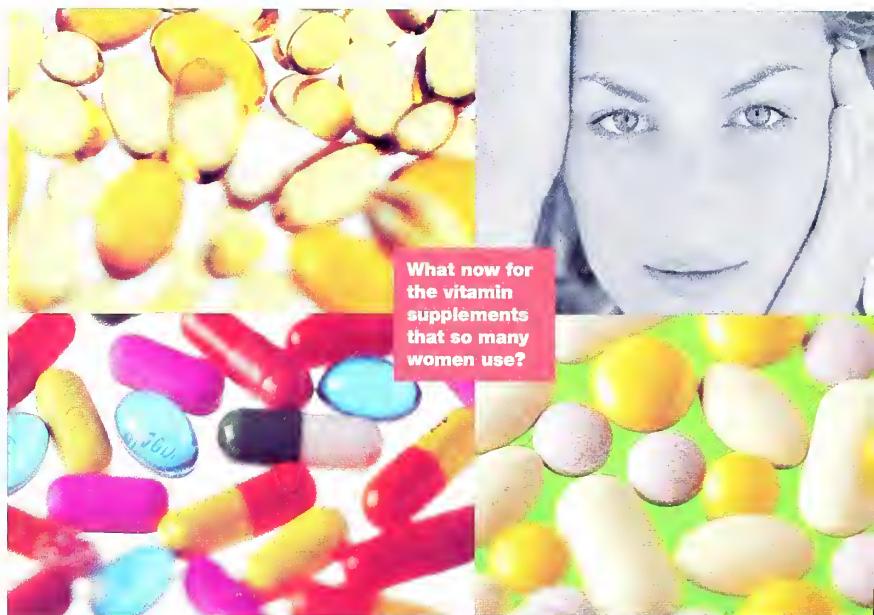
The Save our Supplements campaign, backed by Consumers for Health Choice, believes the 300 substances which did not make the positive list could span thousands of

products. SOS is particularly concerned about the absence of boron, a nutrient often used in supplements for



Vitamin SOS

The forthcoming European Food Supplements Directive is going to have a massive impact on your VMS business. But are you prepared for your customers' questions, asks **Ailsa Colquhoun**



What now for the vitamin supplements that so many women use?

women to help the uptake of calcium. It notes that vanadium and sulphur – including glucosamine sulphate which is used in many products for the skin and connective tissue – are also missing from the list, as are 14 forms of selenium, silicon and all 10 amino-acid-chelate forms of the minerals, which will

prevent manufacturers from marketing most effective form of their products other than as a licensed product (*see box*).

By adopting this list, says SOS, "the right of consumers to protect their own health in the way they choose will be diminished, forcing many to resort to

Key positive list omissions: WHAT'S OUT

Substance	Benefit
Mixed tocopherols (almost the whole spectrum of naturally-occurring Vitamin E)	Antioxidants, which protect against damage by free-radicals which are associated with cancer and other degenerative diseases
Boron (all forms)	Required for absorption of calcium
Vanadium (all forms)	Controls diabetes or blood-sugar levels, better in combination with bioavailable chromium forms
Selenium (14 different forms, including selenium yeast products)	Antioxidants. Important for heart function. Very low or non-existent in foods owing to mineral depletion of agricultural soils
Calcium ascorbate	A type of Vitamin C for those who cannot tolerate ascorbic acid
Calcium (23 different food forms)	Includes many bioavailable forms of calcium needed for bones, teeth and cell function. Dairy products do not provide substantial bioavailable forms of calcium
Chromium (in 17 different forms) including picolinate and polynicotinate	Important for balancing blood sugar levels; manages arteriosclerosis; widely used in diabetics
Copper (24 different forms)	For artery strength, maintaining connective tissue
Iron (21 food forms, including iron-based yeast)	For blood and many enzymes involved in energy metabolism
Magnesium (30 different forms)	For healthy bones and teeth, nerve transmission and muscle contraction
Molybdenum (15 different forms of amino acid chelate)	Essential component of enzymes involved in the production of genetic material. May reduce tooth decay
Potassium (21 different forms)	Maintains blood pressure and heart beat rhythm
Colloidal or ionic trace elements derived from natural sources	Very wide range of health benefits
Colloidal silicic acid	Helps in the maintenance of healthy nails

Source: Alliance for Natural Health

Test your knowledge

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unregulated and sometimes suspect overseas internet or foreign mail order companies".

The arrival of the EC Directive into UK law in 2005

marks the end of a six-year process designed to ensure consumer safety and to create harmony in food supplement sales across the European Union, where controls, regulation and legislation relating to supplements varies enormously. Opponents say the directive simply restricts product availability and curtails consumer choice.

The problem in the UK has arisen mainly because, until now, the UK has not operated on the EU principle of Napoleonic Law, under which everything is forbidden unless specifically allowed. Instead, supplement manufacturers marketing non-licensed products in the UK have used self-regulation mechanisms, such as those operated by the Health Food Manufacturers Association and the Proprietary Association of Great Britain, in conjunction with The Food Safety Act, to make sure products are safe and effectively marketed.

Government ministers opposing the EC Directive point out that more than 50 years of market history have still failed to throw up any safety concerns for some nutrients. In a recent House of Lords debate, shadow health minister Earl Howe pointed out that, by

outlining upper safe limits, the Food Standards Agency's Expert Group on Vitamins and Minerals itself recognises that many supplements missing from the list are safe in certain doses.

Despite losing the Lords debate 132 to 79, the Government is obliged to incorporate the EC Directive into UK law, and regulations enacting the positive list were laid before Parliament in June this year.

However, for the four out of 10 UK consumers who take a food supplement, the story doesn't end here. The Food Supplements Directive only covers which supplements can be sold in the UK. The strengths of these products and the claims they can make fall under legislation which is yet to be passed.

The Food Standards Agency has just released a consultation letter that gives a good idea of the proposed legal parameters on allowable claims. It says that, under the new legislation, all health claims for food supplements will have to be pre-vetted by the European Food Safety Authority, but for three years from the implementation date, manufacturers will be allowed to market products making a health claim, as long as it appears on a list of well-established claims. In the UK, product claims are already pre-vetted by a voluntary code of practice operated via

the Joint Health Claims Initiative and an approved list of claims already exists. The consultation is open until late October and the

Positive Use of Vitamins

Vitamins

- Vitamin-A
- Vitamin-D
- Vitamin-E
- Vitamin-K
- Vitamin-B1
- Vitamin-B2
- Niacin
- Pantothenic Acid
- Vitamin-B6
- Folic Acid
- Vitamin-B12
- Biotin
- Vitamin-C

Minerals

- Calcium
- Magnesium
- Iodine
- Copper
- Zinc
- Manganese
- Sodium
- Potassium
- Selenium
- Chromium
- Molybdenum
- Fluoride
- Chloride
- Phosphorus

JHCI says it will submit its positive list for consideration by the EU. It is confident that, thanks to the existing UK system, the additional burden of the EU system will be minimal.

However, UK supplement manufacturers are worried about what Europe will decide on setting upper safe limits for supplements. In the UK, high dose products are freely available, but the fear is that Euro legislation will remove them.

During the Lords debate in June, health minister Lord Warner told peers the Government takes the view that upper safe levels should be based on scientific risk assessment and not limited by considerations of nutritional need. However, the HFMA remains concerned that the eventual maximum levels will be considerably lower ▶

Manufacturers have used
self-regulation
to ensure safety



From the left: Sharon Flynn of Holland & Barrett, Margaret Peet of EAS Nutrition, Dr Brian Iddon, MP for Bolton south east and Sue Croft, director of Consumers for Health Choice presenting their one million signature petition to the House of Commons

The Loving Spoonful

Just one spoonful a day of
'Joint Plus'

contains 1500mg
Glucosamine Sulphate,
Chondroitin and
Vitamin C.



Available from



For further information
call 01942 816184 or email
buy@mapharmacchem.co.uk

Another quality product from



Test your knowledge

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than those the UK is used to. The HFMA does welcome the report from the FSA's Expert Group on Vitamins and Minerals, which clearly highlights the difference between what is safe and what is necessary from a nutritional point of view. The HFMA says it is already working with the FSA to come up with advisory label statements for the few nutrients on the market at levels very different from those proposed by the EVM.

Manufacturers such as Sage Organic find it difficult to foresee a satisfactory outcome on USLs. Its internal research shows that more

than half of VMS users are already careful about taking too high a dose.

Seven Seas, for one, acknowledges that research will become more important and that, to survive in the market, the need to produce quality, evidence-based products will be "forefront of mind".

The HFMA is currently holding regular meetings with the Food Standards Agency to discuss possibilities for simplifying dossiers for ingredients with a history of safe use, grouping of ingredients, and labelling issues.

Campaigners such as SOS are also looking to address the safety dossier issue and are pressing Government to seek an amending directive for the UK alone, which would

allow existing products to be marketed only in the UK.

Another lobby group, the Alliance for Natural Health, is mounting a legal challenge to the Food Supplements Directive, believing it to centre on freedom of choice.

The Food Supplements Directive is a framework directive and, according to the HFMA, other categories, such as amino acids and even herbals sold as foods, will be similarly addressed in the future.

SOS says: "Specialist supplement manufacturers will end up as very small in a European ocean full of manufacturers trying to compete with the same limited range at probably low doses." ©

Test your knowledge

Win a bottle of champagne with Over The Counter

Check out what you learned in our VMS feature and you could win a bottle of bubbly. Just tick the correct answers to the questions below, fill in your details and send off the form. The first correct form out of the hat on the closing date of October 31 will be the winner.

1 When does the EU Food Supplements Directive come into effect in the UK?

- a August 1 2004
- b August 1 2005
- c August 1 2006

2 How many vitamins and minerals remain on the 'allowed' list?

- a Eight vitamins and 10 minerals
- b 11 vitamins and 13 minerals
- c 13 vitamins and 15 minerals

3 The Directive is designed to:

- a cut the number of products available
- b create harmony and promote consumer safety in the EU
- c reduce the dosage of products

4 More legislation is due, covering:

- a the strength of products
- b the claims which can be made
- c the way products are packaged

5 Other categories likely to face similar examination in due course, include:

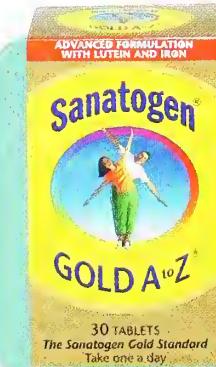
- a amino acids
- b herbs sold as food
- c juices

Name _____

Pharmacy _____

Address _____

SEND YOUR ENTRY TO: Test Your Knowledge, Over The Counter/Colds & Flu, Sovereign House, Sovereign Way, Tonbridge, Kent TN9 1RW



Sanatogen's Gold Standard

Sanatogen Gold A-Z is a multi-vitamin and mineral supplement with added lutein for adults & eyes. Suitable for adults and children over 12 years, it is formulated to ensure the right balance of vitamins and minerals to maintain good health with today's busy lifestyles.

One tablet provides the recommended daily intake of

Vitamins A, B1, B2, B6, B12, D, and E, niacin, folic acid and zinc. Gold A-Z is formulated to help maintain healthy bones, teeth and skin, eyes and skin, immune system, cognitive function, metabolism, heart and circulation.

Roche Consumer Health,
Tel: 01707 366000

Potters - backed by science

The Potter's Herbal Medicines range, established since 1812, is now Europe's largest, with 135 licensed herbal products.

Among the best sellers are:

Potter's Tabritis Tablets to ease pain and stiffness of rheumatic joints; Acidosis Tablets to help relieve indigestion; Antitis Tablets to ease symptoms of cystitis; Antifect Tablets to help alleviate hayfever; Vegetable Cough Remover; Nodoff Tablets or Mixture to promote relaxation and sleep; NewRelax tablets to help ease feelings of tension and irritability caused by a hectic lifestyle; Elixir of Echinacea to help the body fight infection.

Potter's Herbal Medicines, Tel: 01942 405100.



HealthAid comes of age

VMS specialist Health Aid celebrates 21 years in the health and wellbeing sector.

The company says its philosophy has been "to provide a range of products that are carefully researched and nutritionally balanced and which help to supplement the many and varied needs of everyone".

All products are formulated by house pharmacists and nutritionists and, wherever possible, are made from natural sources and are free from additives, artificial colouring, sugar and dairy products.

The range now has more than 450 products.

The summer has seen a new advertising campaign in men's, women's and health titles, with in-store support in the form of point of sale material.

Pharmadass,
Tel: 020 8426 3400.



Centrum Performance naturally helps people perform at their best and is designed to appeal to healthy, self-motivated people aged 25-plus. It includes vitamins and minerals to help combat the effects of free radicals and unlock energy for mind and body. Launch support includes radio and TV advertising and a consumer PR campaign.

Centrum Performance is in packs of 30 and 60 tablets, retailing at £6.99 and £11.49 respectively.

Wyeth Consumer Healthcare,
Tel: 01628 669011.



behind the COUNTER

Do you know, I've just come to the conclusion that I deserve a medal! I'm not blowing my own trumpet, but after the morning I've had, I think I deserve it.

For the first two hours I was apologising to my customers for not having a pharmacist and for the rest of the morning I was apologising because our main supplier was stuck on the motorway with our order in his van. Customers who are usually pleasant and sociable looked strangely annoyed, some were cross and verging on aggression. My stress levels were also well above normal.

Eventually, our cheerful van driver arrived. He was full of stories of bumper-to-bumper traffic. This little blip in our delivery system had sent our shops into chaos and it just made me think how much our shop relies on a huge network of companies and transport systems.

We have numerous deliverymen calling at our shop – they bring everything we sell and need, including change, cleaning materials and a daily photoprocessing service – but the person we see most is Stan. He delivers twice a day and is a real character.

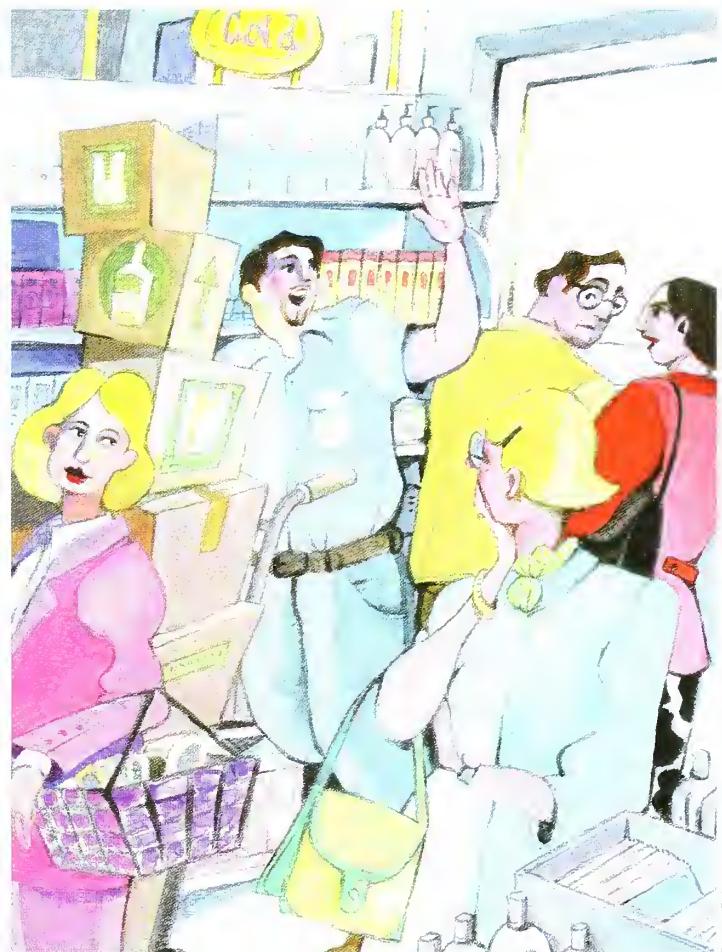
It always amazes me the way he can park his big white van in the tiniest of spaces, but can't walk down the shop aisle without knocking something off the gondola or shaving more paint off

This little **blip** in our delivery system sent our shop into **chaos**

the shop door. The customers are totally unaware of him until he shouts: "Mind your backs." Then they all jump and rush out of the way to avoid his overloaded trolley.

Once in the pharmacy, he undergoes a personality change. A huge smile appears on his face and we are always pleased to see him. Sometimes he brings us news and gossip from other shops. He winks and flirts and tells us jokes. At Christmas he seems to think a seasonal kiss is on the agenda, but we have all avoided that so far!

We rely on people like Stan, but often we hardly give them a second thought, so here's an ode to deliverymen:



Sarah B Kranz

He parks his van with expert ease, but sometimes it's an awful squeeze.

*And as he piles his trolley high, his heavy burden makes him sigh.
He makes his mark upon the door – some bottles topple on the floor.
Stan gives the staff a great big grin as all the stock is trundled in.
He brings us gossip, tells us news of accidents and traffic queues.
I'll see you soon, he likes to shout, wheeling
his empty trolley out.*

*For on and on he has to slog through wind
and rain and snow and fog.*

*What would we do without our Stan –
the speedy white van deliveryman?*

Verity



We're giving away 30 packs of Silica-OK!

Silica, nature's beautifier, is essential for good skin, hair and nails – and replacing any shortfall in our diet is simple, says Wassen.

Although silicon is the second most abundant element on earth, it needs to be present in a soluble form for us to make use of it in the production of collagen in bone, cartilage, tendons and ligaments.

Many people simply do not get enough fibre from their diet so the chances are they are not getting enough silicon either.

Wassen's Silica-OK combines organic silica (8mg) derived from the herb horsetail with nine other nutrients.

We have 30 one-month course packs, worth £6.95, to give away to readers who write in to: **Silica-OK/Over The**

**Counter offer at PO Box 71,
Leatherhead, Surrey KT22
7DP by the closing date of
October 31.**

"Silicon deficiency increases with age and results in weaker hair and nails," says Dr Sarah Brewer, a former GP with a special interest in nutrition, "and may contribute to premature skin ageing" – so what are you waiting for?

Night-life going nowhere

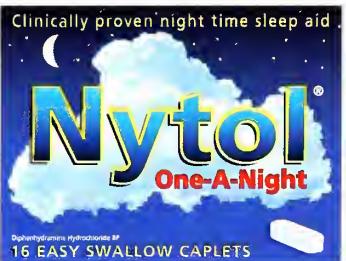


Lying in bed, your whole day going round and round in your head. We've all experienced the frustration of occasional sleepless nights and how out of control they leave us feeling. Many people, however, continue to suffer rather than ask for help, because of a wariness of being 'knocked out'.

Talk to these people about Nytol, the biggest selling sleep enabler in pharmacy.¹ Nytol helps restore natural sleep cycles so your customers can wake bright, refreshed and back in control.

Sleeplessness is a tough ride. You can help bring their suffering to a stop.

Product Information. Presentation: Nytol: White uncoated oblong caplets imprinted with an "N", each containing 25mg of Diphenhydramine Hydrochloride BP. Nytol One-A-Night: White coated oblong caplets imprinted with "N50", each containing 50mg of Diphenhydramine Hydrochloride BP. **Dosage and administration:** Two 25mg caplets or one 50mg caplet to be taken orally 20 minutes before going to bed, or as directed by a physician. Not recommended for children under 16 years. **Uses:** An aid to the relief of temporary sleep disturbance. **Contraindications:** Hypersensitivity to diphenhydramine, asthma, narrow angle glaucoma, prostatic hypertrophy, stenosing peptic ulcer, pyloroduodenal obstruction or bladder neck obstruction. **Precautions:** Nytol and Nytol One-A-Night are not recommended during pregnancy or for lactating mothers. Concomitant use with alcohol, other hypnotics, sedatives,



Diphenhydramine Hydrochloride
Sleepability

tranquillizers or monoamine oxidase inhibitors should be avoided. Nytol and Nytol One should be used with caution in patients with myasthenia gravis or seizure disorders. Nytol One-A-Night produce drowsiness/sedation soon after dosing and will affect ability to drive machines. Tolerance may develop with continuous use. **Side effects:** Dizziness, drowsiness, dryness of mouth, nausea and nervousness. Antihistamines have been reported to cause thrombocytopenia. **Legal category:** P **Product licence number:** Nytol: 0003 Nytol One-A-Night: 00036/0069. **Product licence holder:** GlaxoSmithKline Consumer Health, Brentford, TW8 9GS, UK. **Package quantity and RSP:** Nytol: £2.75 for 16 caplets. Nytol One-A-Night: £4.15 for 16 caplets. **Date of last revision:** January 2002. Nytol is a registered trademark of GlaxoSmithKline Group of Companies. **Reference:** 1. IRI data MAT July 2003.